04/13/2007 16:34

Image# 27930535001

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

	1 Of All Addition2ct	<u> </u>				Office Use Only
	FEC MAILING LABEI TYPE OR PRINT ₩		mple:If typing, t er the lines	уре		
Mike Pence Committee						
ADDRESS (number and street)	O. Box 408					
Check if different than previously reported. (ACC)	nderson				LIN L	46015
2. FEC IDENTIFICATION NUMBER	V	CITY 🛕		;	STATE A	ZIP CODE ▲ STATE ▼ DISTRICT
C00350397	3. IS RE	THIS PORT	X NEW (N)	OR	AMENI (A)	
4. TYPE OF REPORT (Choose (a) Quarterly Reports: X April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Re January 31 Year-End Re Termination Report (TER	(b) 12- t (Q1) c (Q2) eport (Q3) eport (YE) (c) 30-	ection on	-Election Report Primary (12P Convention (** T-Election Rep General (30G	ort for the:	General (1 Special (1 Runoff (30	in the State of
5. Covering Period 0 1	0 1 2 0 0		through and belief it is	0 3	3 1	2007
Type or Print Name of Treasurer	Steve Ford					
Signature of Treasurer Electronical	y Filed by Steve Fol	rd		D	oate 0 4	13 2007
NOTE : Submission of false, erroneous	s, or incomplete informa	tion may s	ubject the perso	on signing thi	s Report to the	penalties of 2 U.S.C 437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

Image# 27930535002

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003) Page 2 Write or Type Committee Name Mike Pence Committee ° D 0 1 03 2007 From: 0 1 2007 3 1 Report Covering the Period: To: **COLUMN B COLUMN A This Period Election Cycle-to-Date** Net Contributions (other than loans) (a) Total Contributions 123932.06 125507.06 (other than loans) (from Line 11(e))...... (b) Total Contribution Refunds 1600.00 1600.00 (from Line 20(d))..... (c) Net Contributions (other than loans) 122332.06 123907.06 (subtract Line 6(b) from Line 6(a))....... 7. Net Operating Expenditures (a) Total Operating Expenditures 99100.53 157652.39 (from Line 17)..... (b) Total Offsets to Operating 67.90 2815.44 Expenditures (from Line 14)..... (c) Net Operating Expenditures 154836.95 99032.63 (subtract Line 7(b) from Line 7(a))....... Cash on Hand at Close of 412928.90 Reporting Period (from Line 27)..... 9. Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)..... For further information contact: Federal Election Commission 999 E Street, NW

Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

FEC Form 3 (Revised 02/2003)

DETAILED SUMMARY PAGE

of Receipts

Page 3

Write or Type Committee Name Mike Pence Committee ° D 0 1 2007 03 2007 From: 0 1 Report Covering the Period: To: 3 1 **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 81218.83 82218.83 (i) Itemized (use Schedule A)..... 6419.68 6994.68 (ii) Unitemized..... (iii) TOTAL of contributions 87638.51 89213.51 from individuals..... 360.00 360.00 (b) Political Party Committees..... (c) Other Political Committees 35933.55 35933.55 (such as PACS)..... 0.00 0.00 (d) The Candidate..... (e) TOTAL CONTRIBUTIONS (other than loans) 123932.06 125507.06 (add Lines 11(a)(iii), (b), (c), and (d)) 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES..... 13. LOANS (a) Made or Guaranteed by the 0.00 0.00 Candidate..... 0.00 0.00 (b) All Other Loans..... (c) TOTAL LOANS 0.00 0.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 67.90 2815.44 (Refunds, Rebates, etc.).... 15. OTHER RECEIPTS 2584.84 4223.58 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...... 126584.80 132546.08

FEC Form 3 (Revised 02/2003)

DETAILED SUMMARY PAGE

of Disbursements

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	99100.53	157652.39
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
(b) Of all Other Loans	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees	1600.00	1600.00
(b) Political Party Committees (c) Other Political Committees	0.00	0.00
(such as PACs) (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	1600.00	1600.00
21. OTHER DISBURSEMENTS	25000.00	25000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	125700.53	184252.39
III. CASH SUMMA	ARY	
23. CASH ON HAND AT BEGINNING OF REPORTING	PERIOD	412044.63
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, pag	ge3)	126584.80
25. SUBTOTAL (add Line 23 and Line 24)		538629.43
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line	e 22)	125700.53
27. CASH ON HAND AT CLOSE OF REPORTING PER		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	(check only one) 11a X 11b 11c 11d 11d 12 13a 13b 14 15
Ar	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may	y not be sold or used by any person	n for the purpose of soliciting contributions
or	NAME OF COMMITTEE (In Full) Mike Pence Committee	патте апо аос	aress or any pontical committee to	Solicit Contributions from Such Committee.
Α.	Full Name (Last, First, Middle Initial) Miami County Republican Central Committe Mailing Address 2217 W. Willow Ln. City Peru FEC ID number of contributing federal political committee.	State IN	Zip Code 46970	Date of Receipt M M M
	Name of Employer Receipt For: 2008 X Primary General Other (specify) ▼	Occupation Election C	oycle-to-Date ▼ 60.00	In-Kind Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) 007 meals
В.	Mailing Address 2217 W. Willow Ln.			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Peru FEC ID number of contributing	State IN	Zip Code 46970	Transaction ID: 70323.C12564 Amount of Each Receipt this Period 200.00
	Receipt For: 2008 X Primary General Other (specify)	Occupation	tycle-to-Date ▼	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C .	Full Name (Last, First, Middle Initial) Union County Republican Party Mailing Address 2502 E. Kitchel Rd. City	State	Zip Code	Date of Receipt M M
	Liberty FEC ID number of contributing federal political committee.	C	47353	Amount of Each Receipt this Period 20.00 In-Kind
	Name of Employer Receipt For: 2008 X Primary General Other (specify) ▼	Occupation C	rycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) 007 meals
s	UBTOTAL of Receipts This Page (optional)			280.00
Т	OTAL This Period (last page this line number	only)		

FOR LINE NUMBER: PAGE 6 / 150 SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a X 11b 11c **Detailed Summary Page** 12 13a 13b 14 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Mike Pence Committee Full Name (Last, First, Middle Initial) Johnson Co. Republican Central Committee Date of Receipt Mailing Address 760 St. St. FA-4 0 2 14 2007 City State Zip Code Transaction ID: 70413.C12762 Franklin IN 46131 Amount of Each Receipt this Period FEC ID number of contributing C 80.00 federal political committee. In-Kind Name of Employer Occupation Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2008 Election Cycle-to-Date X Primary General 007 meals 80.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	80.00
TOTAL This Period (last page this line number only)	•	360.00

S	CHEDULE A (FEC Form 3)	Llas congreta cohodulo(s)	FOR LINE NUMBER: PAGE 7 / 150
	EMIZED RECEIPTS	'	Use separate schedule(s) or each category of the	(check only one)
• • • • • • • • • • • • • • • • • • • •	EIVIIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	y information copied from such Reports and for commercial purposes, other than using t	d Statements may the name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Mike Pence Committee			
A.	Full Name (Last, First, Middle Initial) James Ackerman			Date of Receipt
	Mailing Address 8910 Purdue Road,		7.0.	03 / 23 / 2007
	City	State	Zip Code	Transaction ID: 70411.C12658
	Indianapolis	<u>IN</u>	46268	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2300.00
	Name of Employer	Occupation	1	Receipt
	Cardinal Ventures	OWNER		Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	' '	2300.00	7
	Other (specify) ▼	0 0	2300.00	
В.	Full Name (Last, First, Middle Initial) James Ackerman			Date of Receipt
٠.	Mailing Address 8910 Purdue Road,	Suite 690		M M / D D / Y Y Y Y
				03 23 2007
	City	State	Zip Code	Transaction ID: 70411.C12659
	Indianapolis	<u>IN</u>	46268	Amount of Each Receipt this Period
	FEC ID number of contributing	C		2300.00
	federal political committee.	<u> </u>		2500.00
	Name of Employer	Occupation	 1	Receipt
	Cardinal Ventures	OWNER		Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	tycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General	1 1	4600.00	7
	Other (specify) ▼	0 0	4600.00	
C.	Full Name (Last, First, Middle Initial) Bruce Ash			Date of Receipt
	Mailing Address 6570 E. Santa Aurel	ia Dr.		M M / D D / Y Y Y Y
				02 27 2007
	City	State	Zip Code	Transaction ID: 70323.C12571
	Tucson	AZ	85715	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2300.00
	Name of Employer	Occupation	1	Receipt
	Paul Ash Management	partner		Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General		2300.00	7
	Other (specify) ▼		2300.00	
	UPTOTAL (Charles Till B. 17 th and			6900.00
	UBTOTAL of Receipts This Page (optional)			
_	OTAL This Period (last page this line numb	er only)		

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 / 150
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a
Ar or	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Mike Pence Committee			
<u></u> А.	Full Name (Last, First, Middle Initial) Bruce Ash			Date of Receipt
	Mailing Address 6570 E. Santa Aurelia	Dr.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 70323.C12570
	Tucson FEC ID number of contributing federal political committee.	AZ C	85715	Amount of Each Receipt this Period 2300.00
	Name of Employer Paul Ash Management Receipt For: 2008	Occupation partner	n Cycle-to-Date ▼	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		4600.00	
В.	Full Name (Last, First, Middle Initial) Jane Ash Mailing Address 6570 E. Santa Aurella	Dr.		Date of Receipt
	City	State	Zip Code	0 2 2 7 2 0 0 7 Transaction ID: 70323.C12568
	Tucson	AZ	85715-3126	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2300.00
	Name of Employer HOMEMAKER	Occupation HOMEM		Receipt Limit Increased Due to Opponent's
	Receipt For: 2008 X Primary General Other (specify) ▼	Election C	Cycle-to-Date ▼ 2300.00	Spending (2 U.S.C. 441a(i)/441a-1)
<u> </u>	Full Name (Last, First, Middle Initial) Jane Ash	I		Date of Receipt
	Mailing Address 6570 E. Santa Aurella	Dr.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 70323.C12569
	Tucson FEC ID number of contributing	AZ	85715-3126	Amount of Each Receipt this Period
	federal political committee.	C		2300.00
	Name of Employer HOMEMAKER	Occupation HOMEM		Receipt Limit Increased Due to Opponent's
	Receipt For: 2008 Primary X General Other (specify)	Election C	Sycle-to-Date ▼ 4600.00	Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional)			6900.00
Н	OTAL This Pariod (last page this line number			

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 / 150
TEMIZED RECEIPTS	or each category of the	(check only one)
	Detailed Summary Page	X 11a 11b 11c 11d 11d 12 13a 13b 14 15
Any information copied from such Reports and State	ements may not be sold or used by any persor	n for the purpose of soliciting contributions
or for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)	ame and address of any political committee to s	solicit contributions from such committee.
Mike Pence Committee		
Wilke I elice committee		
Full Name (Last, First, Middle Initial) 4. Charlotte Austin		Date of Receipt
Mailing Address 3624 Woodglen Way		M M / D D / Y Y Y Y
011	Olds 7's Olds	03 23 2007
City Anderson	State Zip Code IN 46011	Transaction ID: 70411.C12642 Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	500.00
Name of Employer	Occupation	Receipt
Retired	Retired	Limit Increased Due to Opponent's
Receipt For: 2008	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General Other (specify) ▼	500.00	
Cuter (Speedify)	0 0 0 0 0 0 0 0	
Full Name (Last, First, Middle Initial)		Date of Descipt
Mailing Address 3905 W. Brook Dr.		Date of Receipt
	03 23 2007	
City	State Zip Code	Transaction ID: 70411.C12657
Muncie	IN 47304	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		300.00
Name of Franksia	Occupation	Receipt
Name of Employer Cardinal Health Systems	Occupation PRESIDENT	Limit Increased Due to Opponent's
Receipt For: 2008	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General	300.00	
Other (specify)	000.00	
Full Name (Last, First, Middle Initial)		
Lyle Beckwith Mailing Address 101 E. Monroe Ave.		Date of Receipt
Maining Address TOTE. MOTIFOE AVE.		03 28 2007
City	State Zip Code	Transaction ID: 70413.C12757
Alexandria	VA 22301	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		631.83
<u> </u>	Occupation	In-Kind
Name of Employer NACS	Senior Vice President	Limit Increased Due to Opponent's
Receipt For: 2008	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General	631.83	003 catering
Other (specify)	001.00	
		1421 02
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1431.83
TOTAL This Period (last page this line number or	ıly)	

IT	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 150 (check only one) X
An or	y information copied from such Reports and story commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Mike Pence Committee			
۹.	Full Name (Last, First, Middle Initial) Anthony Bedell Mailing Address 601 Pennsylvania Ave #200	€.		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 70413.C12758
	Washington FEC ID number of contributing federal political committee.	C	20006	Amount of Each Receipt this Period 287.00
	Name of Employer Intuit Inc. Receipt For: 2008 X Primary General Other (specify)		n nent Affairs Cycle-to-Date ▼ 287.00	In-Kind Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) 003 catering
3.	Full Name (Last, First, Middle Initial) George Branam			Date of Receipt
	Mailing Address 1138 Warwick Rd.			03 / 19 / Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 70323.C12600
	Muncie FEC ID number of contributing federal political committee.	C	47304	Amount of Each Receipt this Period 1000.00
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI		Receipt Limit Increased Due to Opponent's
	Receipt For: 2008 X Primary General Other (specify)	Election C	Cycle-to-Date ▼ 1000.00	Spending (2 U.S.C. 441a(i)/441a-1)
 C.	Full Name (Last, First, Middle Initial) Kenneth Briner			Date of Receipt
	Mailing Address 1401 N. Regency Par	way		03 / 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 70411.C12653
	Muncie FEC ID number of contributing federal political committee.	C	47304	Amount of Each Receipt this Period 500.00
	Name of Employer Muncie Power Products, In- c.	Occupation EXECUT	TIVE	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 X Primary General Other (specify)	Election C	Cycle-to-Date ▼ 500.00	Opending (2 0.0.0. 441a(I)/441a-1)
S	UBTOTAL of Receipts This Page (optional) .			1787.00
т	OTAL This Period (last page this line number	r only))	

SCHEDULE A (FEC Form 3		Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 / 150			
TEMIZED RECEIPTS		or each category of the	(check only one)			
		Detailed Summary Page	X 11a 11b 11c 11d 12 13a 13b 14 15			
Any information copied from such Reports and	Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions			
or for commercial purposes, other than using the	ne name and add	dress of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)						
Mike Pence Committee						
Full Name (Last, First, Middle Initial)						
A. Jack Buckles			Date of Receipt			
Mailing Address 110 E. Charles			03 09 2007			
City	State	Zip Code	Transaction ID: 70323.C12547			
Muncie	IN	47305	Amount of Each Receipt this Period			
FEC ID number of contributing		1 1 1 1 1 1				
federal political committee.	C		500.00			
Name of Employer	Occupation	n	Receipt			
Name of Employer Beasley & Gilkison, LLP	Lawyer		Limit Increased Due to Opponent's			
Receipt For: 2008		Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
X Primary General		500.00	1			
Other (specify)		300.00	1			
Full Name (Last, First, Middle Initial)	L					
Bill Butterfield	1.0.11.0		Date of Receipt			
Mailing Address 5001 Plaza East Blvd	03 30 2007					
City	State	Zip Code	Transaction ID: 70411.C12697			
Evansville	IN	47715	Amount of Each Receipt this Period			
FEC ID number of contributing	С		500.00			
federal political committee.						
Name of Employer	Occupation	n	Receipt			
self	_, '	Executive	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
Receipt For: 2008	Election C	Cycle-to-Date ▼	Spending (2 0.3.0. 4418(1)/4418-1)			
X Primary General Other (specify) ▼		500.00				
Cutof (Specify) \	0 0	0 0 0 0 0 0 0	1			
Full Name (Last, First, Middle Initial)			Data of Receipt			
Brent Candebat Mailing Address 10648 S. Auburn Hill	s Dr		Date of Receipt			
TOO40 3. AUDUITI FIII	о DI.		03 23 2007			
City	State	Zip Code	Transaction ID: 70411.C12637			
Edinburgh	IN	46124	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		500.00			
			Receipt			
Name of Employer self	Occupation		Limit Increased Due to Opponent's			
Receipt For: 2008	Financial Flection C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
X Primary General			1			
Other (specify) ▼	0 0	500.00				
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional)					
		<u> </u>				
TOTAL This Period (last page this line number	er only))				

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 12 / 150 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 11d
Ar	ny information copied from such Reports an	d Statements may	not be sold or used by any pers	n for the purpose of soliciting contributions
or	NAME OF COMMITTEE (In Full)	the name and add	dress of any political committee to	o solicit contributions from such committee.
\rangle	Mike Pence Committee			
۹.	Full Name (Last, First, Middle Initial) Carl Cohen			Date of Receipt
	Mailing Address 1106 Laurelwood			03 / 30 / 2007
	City	State	Zip Code	Transaction ID: 70411.C12701
	Carmel	IN	46032	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2300.00
	Name of Employer CIC Enterprises, Inc	Occupation Presiden	n t and CEO	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		2300.00	
3.	Full Name (Last, First, Middle Initial) Shirley Cohen			Date of Receipt
	Mailing Address 1106 Laurelwood			03 / 00 / 4 2007
	City	State	Zip Code	Transaction ID: 70411.C12700
	<u>Carmel</u>	IN	46032-8746	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2300.00 Receipt
	Name of Employer HOMEMAKER	Occupation HOMEM		Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	2300.00	
).	Full Name (Last, First, Middle Initial) Joseph Cook			Date of Receipt
	Mailing Address 3804 Laurel Ln			03 20 2007
	City	State	Zip Code	Transaction ID: 70323.C12619
	Anderson	IN	46011	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Alac Services, Inc.	Occupation Retired	n	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		250.00	
s	UBTOTAL of Receipts This Page (optiona)		4850.00
_	OTAL THE DESIGNATION OF THE	t-)		
1	OTAL This Period (last page this line numl	per only)		

				_
S	CHEDULE A (FEC Form 3		Use separate schedule(s)	FOR LINE NUMBER: PAGE 13 / 150 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
An or	ny information copied from such Reports and for commercial purposes, other than using the	Statements may ne name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	Mike Pence Committee			
۹.	Full Name (Last, First, Middle Initial) Marshall Cooper			Date of Receipt
	Mailing Address 35 Anderson Road			03 / 09 / 2007
	City	State	Zip Code	Transaction ID: 70323.C12563
	Greenwich	СТ	06830	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2000.00
	Name of Employer self	Occupatio	n	Receipt
			ng Entrepreneur	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 X Primary General	Election C	Cycle-to-Date ▼	Spensing (2 events 1114(), 1114 1,
	Other (specify)		2000.00	
 3.	Full Name (Last, First, Middle Initial) Michael Cox			Date of Receipt
	Mailing Address P.O. Box 792 905 N. Meadow Ln. 4	17304		03 15 2007
	City	State	Zip Code	Transaction ID: 70323.C12588
	Muncie	IN	47308-0792	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer First Merchants Bank	Occupatio BANKER		Receipt Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		1000.00	
 C.	Full Name (Last, First, Middle Initial) Robert Curtis			Date of Receipt
	Mailing Address 5505 W. Pineridge R	d		03 14 2007
	City	State	Zip Code	Transaction ID: 70323.C12579
	Muncie	IN	47304	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Cardinal Health Care Syst-	Occupatio	n	Receipt
	ems	Presiden		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 X Primary General	Election C	Cycle-to-Date ▼	Spensing (2 events 1114(), 1114 1,
	Other (specify) ▼		1000.00	
s	UBTOTAL of Receipts This Page (optional)			4000.00
	,		•	
T	OTAL This Period (last page this line number	er only)		

	EDULE A (FEC Form 3 MIZED RECEIPTS)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 150 (check only one) X 11a 11b 11c 11d 11d 12 13a 13b 14 15
Any inf or for c	formation copied from such Reports and commercial purposes, other than using	d Statements may the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
1	ME OF COMMITTEE (In Full) ke Pence Committee			
A. Dar Mai City Ne FEC feder City Rec	Name (Last, First, Middle Initial) hny Danielson lling Address 727 Leland Street www Castle C ID number of contributing eral political committee. me of Employer y Securities ceipt For: 2008 Primary General Other (specify)		Zip Code 47362 n irman of the Board ycle-to-Date ▼ 2300.00	Date of Receipt M M
A. Dar Mai Mai City Ne FEC fede	Name (Last, First, Middle Initial) Any Danielson Illing Address 727 Leland Street W Castle C ID number of contributing eral political committee. The of Employer of Securities Selept For: 2008 Primary X General Other (specify)		Zip Code 47362 n irman of the Board ycle-to-Date ▼ 4600.00	Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID: 70411.C12632 Amount of Each Receipt this Period 2300.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
City Mu FEC fedde	C ID number of contributing eral political committee. me of Employer f ceipt For: 2008	State IN C Occupation Attorney Election C	Zip Code 47305 47305 ycle-to-Date ▼ 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBT	OTAL of Receipts This Page (optional))	5600.00
TOTA	L This Period (last page this line numb	per only)		

S	CHEDULE A (FEC Form 3)		Llas separata ashadula(s)	FOR LINE NUMBER: PAGE 15 / 150		
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)		
•••	EMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 11d		
				12 13a 13b 14 15		
An or	y information copied from such Reports and for commercial purposes, other than using the	Statements may ne name and add	r not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
\setminus	NAME OF COMMITTEE (In Full)					
	Mike Pence Committee					
A.				Date of Receipt		
	Mailing Address 2574 Union St.			03 30 2007		
	City	State	Zip Code	Transaction ID: 70411.C12683		
<u>Columbus</u> IN		IIN	47201	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
	Name of Employer	Occupation	1	Receipt		
	Dunn & Associátes Benefit Admi	President	t/Owner	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 0.3.0. 44 ra(1)/44 ra-1)		
	X Primary General Other (specify) ▼	' '	500.00			
	Other (specify)	0 0	0 0 0 0 0 0 0			
В.	Full Name (Last, First, Middle Initial) Janice Fisher			Date of Receipt		
	Mailing Address P.O. Box 1408	03 23 2007				
	City	Dity State Zip Code				
	Muncie	IN	47308	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		2300.00		
	Name of Employer	Occupation	1	Receipt		
	Retired	Retired		Limit Increased Due to Opponent's		
	Receipt For: 2008	Election Cycle-to-Date ▼		Spending (2 U.S.C. 441a(i)/441a-1)		
	X Primary General Other (specify) ▼		2300.00			
<u> </u>	Full Name (Last, First, Middle Initial) John Fisher			Date of Receipt		
	Mailing Address P.O. Box 1408			03 23 2007		
	City	State	Zip Code	Transaction ID: 70411.C12628		
	Muncie	IN	47308	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		2300.00		
	Name of Employer Retired	Occupation	1	Receipt		
Retired		Retired		Limit Increased Due to Opponent's		
	Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)		
X Primary General		-	2300.00			
	Other (specify)		2300.00	1		
s	UBTOTAL of Receipts This Page (optional)			5100.00		
T.	TOTAL This Period (last page this line number only)					

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 150 (check only one) X 11a 11b 11c 11d 11d 12 13a 13b 14 15
An or	y information copied from such Reports and S for commercial purposes, other than using the	tatements may name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Mike Pence Committee			
Α.	Full Name (Last, First, Middle Initial) Karl Gallant Mailing Address 9506 Gauge Drive City Fairfax Station FEC ID number of contributing federal political committee. Name of Employer Aduston Consulting LLC Receipt For: 2008	State VA C Occupation CONSUL Election C		Date of Receipt M M
	X Primary General Other (specify) ▼	0 0	500.00	
3.	Full Name (Last, First, Middle Initial) Donna Gilkison Mailing Address 2727 S. Parkway Dr. City Muncie FEC ID number of contributing federal political committee. Name of Employer HOMEMAKER Receipt For: 2008 X Primary General Other (specify)	State IN C Occupation HOMEM Election C		Date of Receipt M M J D D J Z 2 0 0 7 Transaction ID: 70323.C12583 Amount of Each Receipt this Period 1000.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C .	Full Name (Last, First, Middle Initial) Hollis Griffin Mailing Address 70 East Cedar Street City Chicago FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: 2008 X Primary General Other (specify)	State IL C Occupation Retired Election C	Zip Code 60611 n sycle-to-Date ▼	Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID: 70411.C12710 Amount of Each Receipt this Period 250.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
S	UBTOTAL of Receipts This Page (optional))	1750.00
Т	OTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 17/150	
TEMIZED RECEIPTS		or each category of the	(check only one)	
		Detailed Summary Page	X 11a 11b 11c 11d 12 13a 13b 14 15	
Any information copied from such Reports and S	Statements mav	not be sold or used by any perso	on for the purpose of soliciting contributions	
or for commercial purposes, other than using the	e name and add	lress of any political committee to	solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)				
Mike Pence Committee				
Full Name (Last, First, Middle Initial)				
William W. Hanka			Date of Receipt	
Mailing Address 4016 14th St., NW			03 15 2007	
1130 Connecticut Ave	., NW Suite 3 State	30 Zip Code	Transaction ID: 70323.C12585	
Washington	DC	20011	Amount of Each Receipt this Period	
FEC ID number of contributing		20011		
federal political committee.	C		500.00	
Name of Employer	Occupation	1	Receipt	
The Ferguson Group	Lobbyist		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 0.5.0. 441a(i)/441a-1)	
X Primary General Other (specify) ▼		500.00		
Cirior (specify)	0 0			
Full Name (Last, First, Middle Initial) 3. Jerry Hardacre			Date of Receipt	
Mailing Address 1905 Winding Way			M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O	
City	State	Zip Code	Transaction ID: 70323.C12532	
Anderson	IN	46011-1842	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		50.00	
			Receipt	
Name of Employer Retired	Occupation Retired	1	Limit Increased Due to Opponent's	
Receipt For: 2008		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)	
X Primary General	Licotion		1	
Other (specify)		50.00		
Full Name (Last, First, Middle Initial) 2. Jerry Hardacre			Date of Receipt	
Mailing Address 1905 Winding Way			M M / D D / Y Y Y Y	
			03 31 2007	
City	State	Zip Code	Transaction ID: 70411.C12716	
Anderson	IN	46011-1842	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		250.00	
Name of Employer	Occupation	1	Receipt	
Name of Employer Retired	Retired	ı	Limit Increased Due to Opponent's	
Receipt For: 2008		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)	
X Primary General		200.00	1	
Other (specify)		300.00		
	1			
SUBTOTAL of Receipts This Page (optional)		>	800.00	
TOTAL This Period (last page this line number	only)		. L	

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 / 150 (check only one)
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	X 11a 11b 11c 11d
			Detailed Summary Fage	12 13a 13b 14 15
Ar or	ny information copied from such Reports and for commercial purposes, other than using t	Statements may he name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)		71	
\rangle	Mike Pence Committee			
۹.	Full Name (Last, First, Middle Initial) Hart Hasten			Date of Receipt
	Mailing Address 901 Roundtable Ct.			03 / 30 / 4 2007
	City	State	Zip Code	Transaction ID: 70411.C12698
	<u>Indianapolis</u>	IN	46260	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2300.00
	Name of Employer Hasten Bancorp	Occupation		Receipt
	Receipt For: 2008	Chairma		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	Liection	Cycle-to-Date ▼	7
	Other (specify) ▼		2300.00	
3.	Full Name (Last, First, Middle Initial) Simona Hasten			Date of Receipt
	Mailing Address 901 Roundtable Ct.	03 30 2007		
	City	State	Zip Code	Transaction ID: 70411.C12699
	Indianapolis	IN	46260	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2300.00
	Name of Employer HOMEMAKER	Occupation HOMEM		Receipt Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	2300.00	
	Full Name (Last, First, Middle Initial) Phillip Himelstein			Date of Receipt
	Mailing Address 502 Forest Blvd.			03 30 2007
	City	State	Zip Code	Transaction ID: 70411.C12702
	Indianapolis	IN	46240	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Hilan Capital	Occupation Investme		Receipt Limit Increased Due to Opponent's
	Receipt For: 2008		Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	500.00	
s	UBTOTAL of Receipts This Page (optional)			5100.00
	,		•	
T	OTAL This Period (last page this line numb	er only)		

S	CHEDULE A (FEC Form 3)	[Use separate schedule(s)	FOR LINE NUMBER: PAGE 19 / 150
ITEMIZED RECEIPTS			or each category of the	(check only one)
• • • • • • • • • • • • • • • • • • • •	EIVIIZED RECEIP I S		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	ny information copied from such Reports and for commercial purposes, other than using the	Statements may ne name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Mike Pence Committee			
A.				Date of Receipt
	Mailing Address 2279 E. 250 N.			03 / 30 / 2007
	City	State	Zip Code	Transaction ID: 70411.C12681
	Bluffton	IN	46714	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer	Occupation	1	Receipt
	Retired	TEACHE	R	Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		250.00	7
	Other (specify) ▼	0 0	230.00	
В.	Full Name (Last, First, Middle Initial) Robert Kersey			Date of Receipt
	Mailing Address 911 N. Briar Rd.	03 09 2007		
	City	State	Zip Code	Transaction ID: 70323.C12543
	Muncie	IN	47304	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2000.00 Receipt
	Name of Employer American Lawn Mower Co.	Occupation Manufact		Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		2000.00	
_	Full Name (Last, First, Middle Initial)			
C.	David Keyston			Date of Receipt
	Mailing Address PO Box 7066			03 / 30 / 4 2007
	City	State	Zip Code	Transaction ID: 70411.C12692
	Carmel	CA	93921	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Retired	Occupation	1	Receipt
	Retired	Retired		Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	300.00	
s	UBTOTAL of Receipts This Page (optional)			2350.00
	OTAL This Period (last page this line number			

S	CHEDULE A (FEC Form 3	1		FOR LINE NUMBER: PAGE 20 / 150			
ITEMIZED RECEIPTS		,	Use separate schedule(s) or each category of the	(check only one)			
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 11d			
			, ,	12 13a 13b 14 15			
Ar or	ny information copied from such Reports an for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.			
\setminus	NAME OF COMMITTEE (In Full)						
	Mike Pence Committee						
A.				Date of Receipt			
	Mailing Address 7802 Eaglecreek Ov	verlook		03 23 2007			
	City	State	Zip Code	Transaction ID: 70411.C12634			
	Indianapolis	IN	46254	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		2300.00			
	Name of Employer Retired	Occupation	<u> </u>	Receipt			
	Retired	Retired		Limit Increased Due to Opponent's			
	Receipt For: 2008	Election C	tycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
	X Primary General Other (specify) ▼	0 0	2300.00				
_	Full Name (Last, First, Middle Initial)						
В.	Phyllis Laskowski			Date of Receipt			
	Mailing Address 7802 Eaglecreek Ov	03 23 2007					
	City	State	Transaction ID: 70411.C12633				
	Indianapolis	IN	46254	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		2300.00			
	Name of Employer	Occupation	<u> </u>	Receipt			
	Retired	Retired		Limit Increased Due to Opponent's			
	Receipt For: 2008	Election C	sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
	Primary X General Other (specify) ▼	0 0	4600.00				
— С.	Full Name (Last, First, Middle Initial) Audrey Lowman	<u> </u>		Date of Receipt			
	Mailing Address 705 Via Horcada			03 31 2007			
	City	State	Zip Code	Transaction ID: 70411.C12714			
	Palos Verdes Pen	CA	90274	Amount of Each Receipt this Period			
	FEC ID number of contributing			500.00			
federal political committee.				Pagaint			
	Name of Employer HOMEMAKER	Occupation HOMEMA		Receipt Limit Increased Due to Opponent's			
	Receipt For: 2008		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
	X Primary General						
	Other (specify) ▼	0 0	500.00				
s	UBTOTAL of Receipts This Page (optiona	l)		5100.00			
Ť		,		_			
T	TOTAL This Period (last page this line number only)						

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 21 / 150
ITEMIZED RECEIPTS			or each category of the	(check only one)
•••	EIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	ny information copied from such Reports and Strong for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Mike Pence Committee			
A.	Full Name (Last, First, Middle Initial) Michael Lunsford			Date of Receipt
	Mailing Address 3601 West Bethel		7.0.	03 31 2007
	City	State	Zip Code	Transaction ID: 70411.C12729
	Muncie	IN	47304	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2000.00
	Name of Employer Coldwell Banker Lunsford	Occupation	า	Receipt
	Coldwell Banker Lunsford	REALTO	R	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008	Election C	sycle-to-Date ▼	Spending (2 0.3.0. 44 ra(1)/44 ra-1)
	X Primary General Other (specify) ▼		2000.00	
	Other (specify)		0 0 0 0 0 0 0	1
_	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 5119 Lake In The Woods Boulevard			03 31 2007
	City State Zip Code			Transaction ID: 70411.C12715
	Lakeland	FL	33815-2942	Amount of Each Receipt this Period
	FEC ID number of contributing			2300.00
	federal political committee.	C		2300.00
	Name of Employer	Occupation	 1	Receipt
	Mutz Group	Merchant Banker		Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		2300.00	7
	Other (specify)	0 0	2300.00	
С.	Full Name (Last, First, Middle Initial) Dan Perritt			Date of Receipt
	Mailing Address 10 Grassy Creek Dr.			M M / D D / Y Y Y Y
	City	State	Zip Code	03 31 2007
	Whiteland	IN	46184	Transaction ID: 70411.C12727 Amount of Each Receipt this Period
	FEC ID number of contributing		10101	
	federal political committee.	C		2300.00
	Name of Employer	Occupation	 1	Receipt
	Poster Display Company	MANAGE		Limit Increased Due to Opponent's
	Receipt For: 2008		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		2300.00	7
	Other (specify)		2500.00	1
		1		
s	UBTOTAL of Receipts This Page (optional)			6600.00
			·	
I T	OTAL This Period (last page this line number	only)		

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 22 / 150 (check only one)			
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a			
Ar	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full) Mike Pence Committee		71				
A.	Full Name (Last, First, Middle Initial) Christopher Popp Mailing Address 10327 Lochmere Ct City Fort Wayne FEC ID number of contributing federal political committee. Name of Employer Perfection Bakery Receipt For: 2008 X Primary General	State IN C Occupation SALES Election C	Zip Code 46814 n	Date of Receipt M M			
В.	Other (specify) ▼ Full Name (Last, First, Middle Initial) Vivian Priddy		250.00	Date of Receipt			
	Mailing Address 1329 Latimer Court City	State	Zip Code	0 3 2 3 2 0 0 7 Transaction ID: 70411.C12656			
	Fort Wayne	IN	46825	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: 2008 X Primary General Other (specify)	Occupation Retired Election C	n Sycle-to-Date ▼	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
C.	Full Name (Last, First, Middle Initial) Thomas Reilly, Jr. Mailing Address 8877 Pickwick Dr. City	State	Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	Indianapolis	IN	46260	Transaction ID: 70411.C12669 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		2300.00 Receipt			
	Name of Employer Retired Receipt For: 2008 X Primary General Other (specify) ▼	Occupation Retired Election C	cycle-to-Date ▼ 2300.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
s	UBTOTAL of Receipts This Page (optional))	2850.00			
т	FOTAL This Period (last page this line number only)						

S	CHEDULE A (FEC Form 3)		FOR LINE NUMBER: PAGE 23 / 150		
ITEMIZED RECEIPTS		′	Use separate schedule(s) or each category of the	(check only one)		
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 11d		
				12 13a 13b 14 15		
Ar	y information copied from such Reports and	Statements may	not be sold or used by any pers	on for the purpose of soliciting contributions		
or	for commercial purposes, other than using t	the name and add	dress of any political committee to	o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
17	Mike Pence Committee					
_	Full Name (Last, First, Middle Initial)			1		
Α.	Jeffrey Rhoades			Date of Receipt		
	Mailing Address 4060 N. Riverside D	r.		M M / D D / Y Y Y Y		
				03 31 2007		
	City	State	Zip Code	Transaction ID: 70411.C12728		
	Columbus	IN	47203	Amount of Each Receipt this Period		
	FEC ID number of contributing	C		500.00		
	federal political committee.	<u> </u>		300.00		
	Name of Employer	Occupation	า	Receipt		
	self	DENTIST		Limit Increased Due to Opponent's		
	Receipt For: 2008		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)		
	X Primary General	1	·	7		
	Other (specify) ▼		500.00			
_	Full Name (Last, First, Middle Initial)					
В.	J. Patrick Rooney			Date of Receipt		
	Mailing Address 5835 West 74th St.			03 31 2007		
	City State Zip Code			Transaction ID: 70411.C12724		
	Indianapolis	IN	46278	Amount of Each Receipt this Period		
	•		10270			
	FEC ID number of contributing federal political committee.	C		2300.00		
				Receipt		
	Name of Employer Retired	Occupation	1	· •		
	Paradal Farm	Retired	and to Date -	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Receipt For: 2008 X Primary General	Election C	ycle-to-Date ▼			
	Other (specify)		2300.00			
	care. (epocary) 🔻		1 1 1 1 1 1 1	_		
	Full Name (Last, First, Middle Initial)					
C.	Douglas Rose			Date of Receipt		
	Mailing Address 10799 Diamond Driv	⁄e		M M / D D / Y Y Y Y		
	City	Ctctc	7in Codo	03 27 2007		
	City Carmel	State IN	Zip Code	Transaction ID: 70411.C12705		
		IIN	46032-0175	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		2300.00		
Name of Employer				Descipt		
		Occupation		Receipt		
	C.	_ , ,	nts/Property Manaager	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Receipt For: 2008	Election C	ycle-to-Date ▼	Sponding (2 0.0.0. ++14(1)/++14 1)		
	X Primary General	' '	2300.00			
	Other (specify)			_		
Г						
٩	UBTOTAL of Receipts This Page (optional)	1		5100.00		
\vdash						
T	TOTAL This Period (last page this line number only)					

SCHEDULE A (FEC For ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 150 (check only one) X				
Any information copied from such Re or for commercial purposes, other that	ports and Statements ma in using the name and ad	ay not be sold or used by any persoldress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) Mike Pence Committee							
Full Name (Last, First, Middle Initi Nicholas Runnebohm Mailing Address 3177 S. 375 City Shelbyville FEC ID number of contributing federal political committee. Name of Employer Runnebohm Construction Co In Receipt For: 2008 X Primary General Other (specify)	E. State IN C Occupation General	Zip Code 46176-9245 on Contractor Cycle-to-Date ▼ 1000.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Full Name (Last, First, Middle Initi Frances Sargent Mailing Address 901 N. Briar City Muncie		Zip Code 47304-5103	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
FEC ID number of contributing federal political committee. Name of Employer HOMEMAKER Receipt For: 2008 X Primary General Other (specify) ▼	Occupation HOMEM		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)				
Full Name (Last, First, Middle Initi Linda Sargent Mailing Address 1247 Stone F City Greenwood FEC ID number of contributing federal political committee. Name of Employer Sargent & Meier Law Office Receipt For: 2008 X Primary General Other (specify)	State IN C Occupation Lawyer	Zip Code 46143-8828 on Cycle-to-Date ▼	Date of Receipt M				
SUBTOTAL of Receipts This Page	SUBTOTAL of Receipts This Page (optional)						
TOTAL This Period (last page this li	ne number only)						

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 25 / 150
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a
Ar	ny information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , , ,	
\rangle	Mike Pence Committee			
A.	Full Name (Last, First, Middle Initial) Gary N. Schahet			Date of Receipt
	Mailing Address 9333 N. Meridian Suite 203			03 / 30 / 2007
	City Indianapolis	State IN	Zip Code 46260	Transaction ID: 70411.C12703
	FEC ID number of contributing federal political committee.	C	40200	Amount of Each Receipt this Period 1500.00
	Name of Employer Schahet Hotels Inc.	Occupation HOtel Ma	n anagement	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008 X Primary General Other (specify) ▼	Election C	Cycle-to-Date ▼ 1500.00	Spending (2 U.S.C. 441a(i)/441a-1)
В.	Full Name (Last, First, Middle Initial) Phyllis Schahet Mailing Address 7951 Meridian Hills Lar	20		Date of Receipt
	Maining Address 7951 Meridian Hills Lar	03 30 2007		
	City	State	Zip Code	Transaction ID: 70411.C12704
	Indianapolis	IN	46240	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1500.00 Receipt
	Name of Employer HOMEMAKER	Occupation HOMEM		Limit Increased Due to Opponent's
	Receipt For: 2008 X Primary General Other (specify) ▼	Election C	cycle-to-Date ▼ 1500.00	Spending (2 U.S.C. 441a(i)/441a-1)
<u>с.</u>	Full Name (Last, First, Middle Initial) Hamer Shafer			Date of Receipt
	Mailing Address 3700 N. Wyngate Ct.			03 / 09 / 2007
	City	State	Zip Code	Transaction ID: 70323.C12548
	Muncie	IN	47308-0548	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Retired	Occupation Retired	n	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008		Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	1000.00	
s	UBTOTAL of Receipts This Page (optional)			4000.00
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S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 26 / 150
ıT	EMIZED RECEIPTS		or each category of the	(check only one)
	EMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 11d
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An	y information copied from such Reports and S	tatements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	Mike Pence Committee			
/				
	Full Name (Last, First, Middle Initial)			
۹.	Allison Shulman			Date of Receipt
	Mailing Address 4426 South 36th Street	t		M M / D D / Y Y Y Y
	Apt. #A2			03 31 2007
	City	State	Zip Code	Transaction ID: 70411.C12731
	Arlington	VA	22206	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		500.00
				Receipt
	Name of Employer Dickstein, Shapiro, Morin	Occupatio	n	neceipi
	& Os	Lobbyist		Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	-		1
	Other (specify)	l I	500.00	
	Full Name (Last, First, Middle Initial)			
3.	Margaret Smith			Date of Receipt
	Mailing Address 805 North Briar Road			M M / D D / Y Y Y
				03 19 2007
	City	State	Zip Code	Transaction ID: 70323.C12592
	Muncie	IN	47304	Amount of Each Receipt this Period
	FEC ID number of contributing			500.00
	federal political committee.	C		500.00
				Receipt
	Name of Employer HOMEMAKER	Occupatio		· ·
		HOMEM		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008	Election C	Cycle-to-Date ▼	Spending (2 0.5.0. 44 ra(1)/44 ra-1)
	X Primary General	' '	500.00	1
	Other (specify) ▼		300.00	
	Full Name (Last, First, Middle Initial)			
j.	Van Smith			Date of Receipt
	Mailing Address 805 North Briar Road			03 19 2007
	211	01-1-	7's Os de	
	City	State	Zip Code	Transaction ID: 70323.C12591
	Muncie	IN	47304	Amount of Each Receipt this Period
	FEC ID number of contributing	С		500.00
	federal political committee.			000.00
	Name of Employer	Occupatio	<u> </u>	Receipt
	Ontario Corporation		n of the Board	Limit Increased Due to Opponent's
	Receipt For: 2008			Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 X Primary General	Liection	Cycle-to-Date ▼	
	Other (specify)		500.00	
	Cirici (apeciiy)		1 1 1 1 1 1 1	1
_	UDTOTAL (D. 11 THE TOTAL TOTAL			1500.00
S	UBTOTAL of Receipts This Page (optional)		······	
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T	OTAL This Period (last page this line number	only))	

SCHEDULE A (FEC Form 3)	Use separate schedule(s	FOR LINE NUMBER: PAGE 27/150
TEMIZED RECEIPTS	or each category of the	(check only one)
	Detailed Summary Page	12 13a 13b 14 15
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any per name and address of any political committee.	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
Mike Pence Committee		
Full Name (Last, First, Middle Initial) Jack Stanton		Date of Receipt
Mailing Address 3303 E. Co. Rd. 300 S	03 15 7 2007	
City	State Zip Code	Transaction ID: 70323.C12584
Muncie	IN 47305	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Indianapolis Life Insuran-	Occupation	Receipt
ce Co Receipt For: 2008	District Agent Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General		-
Other (specify) ▼	500.00	0
Full Name (Last, First, Middle Initial) 3. Joanne Stoller		Date of Receipt
Mailing Address 2501 Kingston Pointe	03 / 30 / Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 70411.C12686
Fort Wayne	IN 46815	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Stollers Inc.	Occupation	Receipt
Receipt For: 2008	OWNER Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General		
Other (specify)	500.00	
Full Name (Last, First, Middle Initial) Pookie Storms		Date of Receipt
Mailing Address 11801 Browning Rd.		03 / 23 / 2007
City	State Zip Code	Transaction ID: 70411.C12654
Evansville	IN 47725	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer HOMEMAKER	Occupation	Receipt
Receipt For: 2008	HOMEMAKER Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General		
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		1250.00
TOTAL This Davied (last near this line as when	only	
TOTAL This Period (last page this line number	UI II y j	

SC	HEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 28 / 150
	MIZED RECEIPTS		or each category of the	(check only one)
=			Detailed Summary Page	X 11a 11b 11c 11d 15 15 15 15 15 15 1
Any or fo	information copied from such Reports and State commercial purposes, other than using the r	atements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)	iamo ana aac	sroco or any pontion committee to	Control Contro
\	Mike Pence Committee			
	Full Name (Last, First, Middle Initial) Charles Sursa			Date of Receipt
N	Mailing Address 1700 S. Ridgeview Dr.			03 15 2007
	City	State	Zip Code	Transaction ID: 70323.C12586
_	Yorktown	IN	47396	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	С		500.00
Ţ	Name of Employer Robert W. Baird & Co., In-	Occupation	n	Receipt
<u>(</u>	Robert W. Baird & Co., In- C	Financial		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
F	Receipt For: 2008	Election C	Cycle-to-Date ▼	Spending (2 0.3.0. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		500.00	
_	Full Name (Last, First, Middle Initial) Claudia Sursa			Date of Receipt
N	Mailing Address 1700 S. Ridgeview Dr.	03 / 15 / 2007		
(City	State	Zip Code	Transaction ID: 70323.C12587
_	Yorktown	IN	47396	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	С		500.00
1	Name of Employer Voss Center for Women	Occupation		Receipt
_		_	actitioner	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
ŀ	Receipt For: 2008 X Primary General	Election C	Cycle-to-Date ▼	
	Other (specify) ▼		500.00	
	Full Name (Last, First, Middle Initial) Mary Jane Sursa			Date of Receipt
N	Mailing Address 3410 West University A	venue		03 09 7 2007
	City	State	Zip Code	Transaction ID: 70323.C12549
<u> </u>	Muncie	IN	47304	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		500.00
1	Name of Employer HOMEMAKER	Occupation HOMEMAKER		Receipt Limit Increased Due to Opponent's
Ē	Receipt For: 2008	-1	ANER Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
•	X Primary General			1
	Other (specify)	0 0	500.00	
SU	BTOTAL of Receipts This Page (optional)			1500.00
то	TAL This Period (last page this line number o	nlv)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 150 (check only one)
Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
\setminus	NAME OF COMMITTEE (In Full) Mike Pence Committee			
Α.	Full Name (Last, First, Middle Initial) Imogene Taylor Mailing Address 8880 S 800 W. City Daleville FEC ID number of contributing federal political committee. Name of Employer HOMEMAKER	State IN C	Zip Code 47334	Date of Receipt M M M / D D / Y Y Y Y Y O 3
	Receipt For: 2008 X Primary General Other (specify)	HOMEMA Election C	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
В.	Full Name (Last, First, Middle Initial) Terry Walker Mailing Address 8804 West Tulip Tree Drive			Date of Receipt 0 3 1 5 2 0 0 7
	City Muncie	State IN	Zip Code 47304	Transaction ID: 70323.C12582 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Muncie Power Products Inc Receipt For: 2008 X Primary General Other (specify) ▼	Occupation PRESIDE Election C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C.	Full Name (Last, First, Middle Initial) Donald Whitaker Mailing Address 3501 W. University Ave			Date of Receipt
	City	0 3 1 9 2 0 0 7 Transaction ID: 70323.C12590		
	Muncie FEC ID number of contributing federal political committee.	C	47304	Amount of Each Receipt this Period 500.00
	Name of Employer Ball State University Receipt For: 2008 X Primary General Other (specify) ▼	Occupation Administ Election C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional)			2000.00
	OTAL This Period (last page this line number o	nly)		

	DULE A (FEC Form 3) ZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 150 (check only one) X 11a 11b 11c 11d 11d 12 13a 13b 14] 15
Any inforr	nation copied from such Reports and Stanmercial purposes, other than using the r	atements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
NAME	OF COMMITTEE (In Full) Pence Committee				
Mailing City Tucse FEC II federa Name Retire	Address 1715 E. Kleindale Rd. On Onumber of contributing I political committee. of Employer d	State AZ C Occupation Retired Election C	ycle-to-Date ▼	Date of Receipt M M M	
Full Na	Other (specify) ame (Last, First, Middle Initial) White Address 1715 E. Kleindale Rd.	0 0	250.00	Date of Receipt	
City Tucse FEC II	on O number of contributing I political committee. of Employer	State AZ C Occupation Retired	Zip Code 85719	Transaction ID: 70323.C12573 Amount of Each Receipt this Period 250.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Full Na	Primary General Other (specify) ▼ ame (Last, First, Middle Initial) N Wilson	Liconom	250.00	Date of Receipt	
Mailing Address 1408 North Regency Pkwy City State Zip Code				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Muno FEC II federa	O number of contributing I political committee.	IN C	47304-4200	Amount of Each Receipt this Period 1000.00 Receipt	
Receip	of Employer d ot For: 2008 Primary General Other (specify) ▼	Retired	ycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
SUBTO	TAL of Receipts This Page (optional)			1500.00	
TOTAL	This Period (last page this line number o	ınlv)		81218.83	

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 150 (check only one) 11a 11b X 11c 11d 11d 15
An or	y information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Mike Pence Committee			
	Full Name (Last, First, Middle Initial) American Conservative Union PAC Mailing Address 1007 Cameron St. City Alexandria FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2008 X Primary General Other (specify)	State VA C Occupation Election C	Zip Code 22314 n Sycle-to-Date ▼	Date of Receipt M M J D D J 20 2007 Transaction ID: 70323.C12539 Amount of Each Receipt this Period 1000.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Full Name (Last, First, Middle Initial) Associated Builders & Contractors PAC Mailing Address 1300 North 17th Stree City Rosslyn FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2008 X Primary General Other (specify)	State VA C Occupation	Zip Code 22209 n Cycle-to-Date ▼ 1000.00	Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID: 70411.C12689 Amount of Each Receipt this Period 1000.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C.	Full Name (Last, First, Middle Initial) AT&T PAC Mailing Address 32 Ave. Of The Ameri P.O. Box 16021, Alexa City New York FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2008 X Primary General Other (specify)	State NY C Occupation	Zip Code 10013	Date of Receipt 0 3 0 9 2 0 0 7 Transaction ID: 70323.C12540 Amount of Each Receipt this Period 2000.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SI	JBTOTAL of Receipts This Page (optional) .			4000.00
T	OTAL This Period (last page this line number	only))	

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	(check only one)
Ar	y information copied from such Reports and Sta	atements may	not be sold or used by any person	12 13a 13b 14 15 on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and add	ress of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) Mike Pence Committee			
A.	Full Name (Last, First, Middle Initial) Conservative Victory Fund PAC			Date of Receipt
	Mailing Address P.O. Box 15245			03 / 02 / 4 9 9
	City	State	Zip Code	Transaction ID: 70413.C12760
	Washington FEC ID number of contributing	DC	20003	Amount of Each Receipt this Period
	federal political committee.	C Coo	0009704	433.55
	Name of Employer	Occupation	1	In-Kind Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		433.55	003 faxing and annoucement
— В.	Full Name (Last, First, Middle Initial) Cummins Inc. PAC			Date of Receipt
	Mailing Address 601 Pennsylavania Ave North Building Suite 62	5	7'- 0-4	03 31 2007
	City Washington	State DC	Zip Code 20004	Transaction ID: 70411.C12732 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0377952	1000.00
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008 X Primary General	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Other (specify) ▼		1000.00	
C.	Full Name (Last, First, Middle Initial) Dickstein Shapiro Morin & Oshinsky PAC			Date of Receipt
	Mailing Address 2101 L St. NW			03 30 2007
	City Washington	State DC	Zip Code 20037	Transaction ID: 70411.C12690
	FEC ID number of contributing		20037	Amount of Each Receipt this Period
	federal political committee.	C		1000.00
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	1000.00	
s	UBTOTAL of Receipts This Page (optional)			2433.55
Т	OTAL This Period (last page this line number of	nly)		

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SCHEDULE A (FEC Form 3)	Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 33 / 150 (check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	11a 11b X 11c 11d 12 13a 13b 14 15
Ar or	ny information copied from such Reports ar for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
/	Mike Pence Committee			_
۹.	Full Name (Last, First, Middle Initial) Enterprise Rent-a-Car PAC			Date of Receipt
	Mailing Address 600 Corporate park	Drive		03 30 2007
	City	State	Zip Code	Transaction ID: 70411.C12708
	Saint Louis	MO	63105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		1000.00	
	Full Name (Last, First, Middle Initial)			
3.	Exxon Mobil Corporate PAC			Date of Receipt
	Mailing Address 5959 Las Colinas B	03 31 2007		
	City	State	Zip Code	Transaction ID: 70411.C12718
	Irving	TX	75039	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	1000.00	
	Full Name (Last, First, Middle Initial) Health Savings Acct PAC			Date of Receipt
•	Mailing Address 1747 Pennsylvania	Ave. N.W.		M M / D D / Y Y Y Y
	City	State	Zip Code	0 2 2 0 2 0 0 7 Transaction ID: 70323.C12538
	Washington	DC	20006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's
	Receipt For:2008	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	1000.00	
s	UBTOTAL of Receipts This Page (optiona	l)		3000.00
т.	OTAL This Period (last page this line num	her only)		
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	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 150 (check only one) 11a				
Ang or f	y information copied from such Reports and S or commercial purposes, other than using the	Statements may name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.				
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Mike Pence Committee							
Α.	Full Name (Last, First, Middle Initial) Honeywell PAC Mailing Address 101 Constitution Aven Suite 500 West City Washington FEC ID number of contributing federal political committee. Name of Employer	state DC C Occupation	Zip Code 20001	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	Receipt For: 2008 X Primary General Other (specify) ▼	Election C	rycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)				
3.	Full Name (Last, First, Middle Initial) Independent Community Bankers PAC Mailing Address One Thomas Circle No Suite 400 City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2008 X Primary General Other (specify)	State DC C C C C C C C C C C C C C C C C C C	Zip Code 20005 0032698 n sycle-to-Date ▼	Date of Receipt M M 27 2007 Transaction ID: 70323.C12566 Amount of Each Receipt this Period 1000.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)				
C.	Full Name (Last, First, Middle Initial) Kelley Drye Collier Shannon PAC Mailing Address 3050 K St. NW, Ste. 4 City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2008 X Primary General Other (specify)	State DC C	Zip Code 20007	Date of Receipt M M				
SI	SUBTOTAL of Receipts This Page (optional)							
TC	OTAL This Period (last page this line number	only)						

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S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 35 / 150 (check only one)
ΙT	EMIZED RECEIPTS		or each category of the	
	LIVIIZED NECEIF 13		Detailed Summary Page	11a 11b X 11c 11d
				12 13a 13b 14 15
An	y information copied from such Reports and S	tatements ma	y not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and ad	dress of any political committee to	solicit contributions from such committee.
\	NAME OF COMMITTEE (In Full)			
\rangle	Mike Pence Committee			
/				
	Full Name (Last, First, Middle Initial)			
٩.	National Assoc. of Convenience StoresPAC			Date of Receipt
	Mailing Address 1600 Duke Street			M M / D D / Y Y Y Y
				03 30 2007
	City	State	Zip Code	Transaction ID: 70411.C12709
	Alexandria	VA	22314-3436	Amount of Each Receipt this Period
	FFC ID number of contribution			
	FEC ID number of contributing federal political committee.	C		5000.00
	rederal political committee.			
	Name of Employer	Occupatio	n	Receipt
				Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		, , , , , , , , , , , , , , , , , , , ,	1
	Other (specify) ▼		5000.00	
	care (specify) \			1
	Full Name (Last, First, Middle Initial)			
3.	National CableTelecom Assoc. PAC			Date of Receipt
	Mailing Address 1724 Massachusetts A	M M / D D / Y Y Y Y		
	Walling Address 1724 Wassachusells P	03 30 2007		
	City	State	Zip Code	Transaction ID: 70411.C12687
	Washington	DC	20036	
	-	- 50	20030	Amount of Each Receipt this Period
	FEC ID number of contributing	C		5000.00
	federal political committee.			
	Name of Employer	Occupatio	n	Receipt
	,		MENT RELATIONS	Limit Increased Due to Opponent's
	Receipt For: 2008	Flection C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		,,	1
	Other (specify)		5000.00	
		0 0	0 0 0 0 0 0 0	
	Full Name (Last, First, Middle Initial)	ı		
Э.	National Restaurant Assoc. PAC			Date of Receipt
	Mailing Address 1200 17th Street Nw			M M / D D / Y Y Y Y
				03 23 2007
	City	State	Zip Code	Transaction ID: 70411.C12630
	Washington	DC	20036-3097	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		1000.00
				Pagaint
	Name of Employer	Occupatio	n	Receipt
				Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	1	1000.00	1
	Other (specify)	11.	1000.00	
		-		
s	UBTOTAL of Receipts This Page (optional)			11000.00
	1			
Т	OTAL This Period (last page this line number	only)		
	, I J	• /	· ·	

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 36 / 150
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one)
				12 13a 13b 14 15
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	Mike Pence Committee			
۹.	Full Name (Last, First, Middle Initial) National Rifle Association PAC			Date of Receipt
	Mailing Address 11250 Waples Mill Ro	ad		03 / 27 / 2007
	City	State	Zip Code	Transaction ID: 70411.C12660
	<u>Fairfax</u>	VA	22030-7400	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C0	0053553	1000.00
	Name of Employer	Occupatio	n	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		1000.00	1
	Other (specify)	0 0		
3.	Full Name (Last, First, Middle Initial) National Right To Work PAC			Date of Receipt
	Mailing Address 8001 Braddock Rd., S	02 20 7 207		
	City	State	Zip Code	Transaction ID: 70323.C12537
	Springfield	VA	22151	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C0	0164384	1000.00
	Name of Employer	Occupatio	n	Receipt
	Parallel France 2000	T Floring	North to Date	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 X Primary General	Election C	Cycle-to-Date ▼	1
	Other (specify)		1000.00	
).	Full Name (Last, First, Middle Initial) Pepsico Concerned Citizens PAC	•		Date of Receipt
	Mailing Address 706 Anderson Hill Rd.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 70323.C12593
	Purchase	NY	10577	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupatio	n	Receipt
	Receipt For: 2008	Election C	Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		· · · · · · · · · · · · · · · · · · ·	1
	Other (specify) ▼		1000.00	
s	UBTOTAL of Receipts This Page (optional) .			3000.00
_			<u> </u>	
T	OTAL This Period (last page this line number	r only)		

S	CHEDULE A (FEC Form 3)		Llos concrete cobodulo(o)	FOR LINE NUMBER: PAGE 37 / 150
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
•••	EINIZED RECEIP 13		Detailed Summary Page	11a 11b X 11c 11d
				12 13a 13b 14 15
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	name and add	not be sold or used by any personal dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Mike Pence Committee			
A.				Date of Receipt
	Mailing Address 235 East 42nd Street			03 / 09 / 2007
	City	State	Zip Code	Transaction ID: 70323.C12541
	New York	NY	10017	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0016683	1000.00
	Name of Employer	Occupation	n	Receipt
				Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	' '	1000.00	1
	Other (specify)			J
— В.	Full Name (Last, First, Middle Initial) Raytheon PAC			Date of Receipt
٥.	Mailing Address 1100 Wilson Boulevard			M M / D D / Y Y Y Y
	Suite 1500	.		03 09 2007
	City	State	Zip Code	Transaction ID: 70323.C12542
	Arlington	VA	22209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	rederal political committee.			Pagaint
	Name of Employer	Occupation	n	Receipt
	Parada Fara		Viele te Dete	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 X Primary General	Election C	cycle-to-Date ▼	
	Other (specify)		1000.00	
_				
C.	Full Name (Last, First, Middle Initial) RJReynolds Political Action Committee			Date of Receipt
	Mailing Address P.O. Box 718, 401 N. I	Main Street		M M / D D / Y Y Y Y
				03 15 2007
	City	State	Zip Code	Transaction ID: 70323.C12589
	Winston-Salem	NC	27102	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0042002	1000.00
	Name of Employer	Occupation	n	Receipt
	Descript Form 2000		Visite to Date -	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 X Primary General	Election C	Sycle-to-Date ▼	
	Other (specify)		1000.00	
				1
				2000 00
s	UBTOTAL of Receipts This Page (optional)			3000.00
_	OTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 38 / 150
TEMIZED RECEIPTS	or each category of the	(check only one)
· · · · · · · · · · · · · · · · · · ·	Detailed Summary Page	11a 11b X 11c 11d 11d 12 13a 13b 14 15
Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements may not be sold or used by any personame and address of any political committee t	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
Mike Pence Committee		
Full Name (Last, First, Middle Initial) A. Rolls-Royce North America PAC		Date of Receipt
Mailing Address 14850 Conference Cent Suite 100 City	er Drive State Zip Code	0 2 2 7 2 0 0 7 Transaction ID: 70323.C12565
<u>Chantilly</u>	VA 20151	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00296822	1000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's
Receipt For: 2008 X Primary General Other (specify)	Election Cycle-to-Date ▼ 1000.00	Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) 3. Society Of American Florists PAC		Date of Receipt
Mailing Address 1601 Duke Street		03 / 03 / 2007
City Alexandria	State Zip Code VA 22314	Transaction ID: 70411.C12722
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C	1000.00 Receipt
Name of Employer	Occupation	Limit Increased Due to Opponent's
Receipt For: 2008 X Primary General	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Society of Independent Gasoline Marketer		Date of Receipt
Mailing Address of America PAC 11495 Sunset Hills Rd.		03 / 30 / 2007
City Reston	State Zip Code VA 20190	Transaction ID: 70411.C12707
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C	1000.00 Receipt
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 X Primary General	Election Cycle-to-Date ▼	Spending (2 0.3.0. 441a(i)/441a-1)
Other (specify)	1000.00	
SUBTOTAL of Receipts This Page (optional)		3000.00
TOTAL This Period (last page this line number o	nly)	

PAGE 39 / 150 FOR LINE NUMBER: SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 12 13a 13b 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Mike Pence Committee Full Name (Last, First, Middle Initial) Valero PAC Date of Receipt Mailing Address P.O. Box 696000 03 3 1 2007 City State Zip Code **Transaction ID: 70411.C12721** San Antonio TX 78269 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 C federal political committee. Receipt Name of Employer Occupation Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2008 Election Cycle-to-Date X Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Washington PAC Date of Receipt Mailing Address 444 North Capitol Street, NW 0 3 31 2007 Suite 345 City Zip Code Transaction ID: 70411.C12719 State Washington DC 20001 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Receipt Name of Employer Occupation Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2008 Election Cycle-to-Date X Primary General 1000.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	3500.00
TOTAL This Period (last page this line number only)	•	35933.55

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 150 (check only one)
			, ,	12 13a 13b 14 X 15
Ar or	ny information copied from such Reports and Strong for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Mike Pence Committee			
⁄ Α.	Full Name (Last, First, Middle Initial) Markle Bank			Date of Receipt
	Mailing Address P.O. Box 595			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 70411.C12733
	Markle FEGURA 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	IN	46770-	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2466.23
	Name of Employer	Occupation	n	Interest Received Limit Increased Due to Opponent's
	Receipt For: 2008 X Primary General	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Other (specify) ▼		3967.55	
В.	Full Name (Last, First, Middle Initial) Star Financial Bank	•		Date of Receipt
	Mailing Address 735 Main Street	01 31 2007		
	City	State	Zip Code	Transaction ID: 70413.C12753
	Anderson	<u>IN</u>	46016-	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		34.38
	Name of Employer	Occupation	n	Interest Received Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		163.48	
<u> </u>	Full Name (Last, First, Middle Initial) Star Financial Bank			Date of Receipt
	Mailing Address 735 Main Street			02 28 2007
	City	State	Zip Code	Transaction ID: 70413.C12754
	Anderson	IN	46016-	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		33.65
	Name of Employer	Occupation	n	Interest Received Limit Increased Due to Opponent's
	Receipt For: 2008 X Primary General Other (specify)	Election C	Cycle-to-Date ▼ 197.13	Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional)			2534.26
т	OTAL This Period (last page this line number	only)		

FOR LINE NUMBER: PAGE 41 / 150 SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 12 13a 13b X 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Mike Pence Committee Full Name (Last, First, Middle Initial) Star Financial Bank Date of Receipt Mailing Address 735 Main Street 03 31 2007 City Zip Code State Transaction ID: 70413.C12755 **Anderson** IN 46016-Amount of Each Receipt this Period FEC ID number of contributing C 42.42 federal political committee. Interest Received Name of Employer Occupation Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2008 Election Cycle-to-Date X Primary General 239.55 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	42.42
TOTAL This Period (last page this line number only)	•	2576.68

·	5# 2193033042			
	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use seperate schedule(s for each category of the Detailed Summary Page	FOR LINE (check on	PAGE 42 / 150
	y Information copied from such Reports and St for commercial purposes, other than using the r			for the purpose of solicating contributions
\rangle	NAME OF COMMITTEE (In Full) Mike Pence Committee			
Α.	Full Name (Last, First, Middle Initial) Patton, Boggs, LLP			Transaction ID: 70411.E12454 Date of Disbursement 0 1
	Mailing Address 2550 M Street, NW			$ \begin{bmatrix} M & M & M & M & M & M & M & M & M & M &$
	City Washington	State Zip Code DC 20037-		Amount of Each Disbursement this Period
	Purpose of Disbursement Consulting Legal Candidate Name		001 Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Senate President	ursement For: Primary General Other (specify)	Туре	CONSULTING LEGAL
	State: District: Full Name (Last, First, Middle Initial)			Transaction ID: 70411.E12455
B.	Patton, Boggs, LLP Mailing Address 2550 M Street, NW			Date of Disbursement O 3
	City Washington	State Zip Code DC 20037-		Amount of Each Disbursement this Period
	Purpose of Disbursement Consulting Legal Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Senate President	ursement For: Primary General Other (specify) ▼		CONSULTING LEGAL
	State: District: Full Name (Last, First, Middle Initial)			
C.	Patton, Boggs, LLP			Transaction ID: 70411.E12456 Date of Disbursement
	Mailing Address 2550 M Street, NW			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
	City Washington	State Zip Code DC 20037-		Amount of Each Disbursement this Period
	Purpose of Disbursement Consulting Legal Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Senate President	ursement For: Primary General Other (specify)		CONSULTING LEGAL
Г	State: District:			
١٩	IIRTOTAL of Dishursements This Page (ontion	nal)		2022.50

SUBTOTAL of Disbursements This Page (optional)

91	CHEDULE B (FEC Form 3)				
			erate schedule(s)	FOR LINE (check only	NUMBER: PAGE 43 / 150
Ш	EMIZED DISBURSEMENTS		category of the Summary Page	_ i `	X 17 18 19a 19b
_					20a 20b 20c 21
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam				
Ν	NAME OF COMMITTEE (In Full)				
/	Mike Pence Committee				
<u></u>	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12476
A.	Brooklyn Little League				Date of Disbursement
	Mailing Address 2281 East 200 South				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 2 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 3 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ O & O & 7 \end{smallmatrix} \end{bmatrix}$
	City Anderson	State IN	Zip Code 46017-		Amount of Each Disbursement this Period
	Purpose of Disbursement advertising			004	700.00
	Candidate Name			004 Category/	Refund or Disposal of Excess Contributions Required Under
	Cardidate Name			Type	11 C.F.R. 400.53
	°	ement For:			ADVERTISING
	Senate President	Primary Other (spe	General		
	State: District:	Otrici (Spc	City) $lacksquare$		
	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12475
В.	Mudds Self Storage				Date of Disbursement
	Mailing Address 1434 Main Street	$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & I \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & Z \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & T \end{smallmatrix} \end{bmatrix} \ \ \\ \begin{bmatrix} Q & I & M \\ I & I & I \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Q & I & I \\ I & I & I \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} Q & I & I \\ I & I & I \end{smallmatrix} \end{bmatrix} \ \ \\ \begin{bmatrix} Q & I & I & I \\ I & I & I \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} Q & I & I \\ I & I & I \\ I & I \end{smallmatrix} \end{bmatrix} \ \ \\ \begin{bmatrix} Q & I & I \\ I & I & I \\ I & I \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} Q & I & I \\ I & I & I \\ I & I & I \\ I & I \end{smallmatrix} \end{bmatrix} \ \ \\ \begin{bmatrix} Q & I & I \\ I \\ I & I \\ I \\ I & I \\ I & I \\ I \\ I & I \\ $			
	City	State	Zip Code		Amount of Each Disbursement this Period
	Anderson	IN	46016-		453.20
	Purpose of Disbursement storage			001	Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburs	ement For:			STORAGE
	Senate	Primary	General		OTOTIVICE
	President State: District:	Other (spe	сіту) 🔻		
	Full Name (Last, First, Middle Initial)				Transaction ID: 70413.C12761IK
C.	Miami County Republican Central Commi	tte			Date of Disbursement
	Mailing Address 2217 W. Willow Ln.				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
	City	State	Zip Code		Amount of Each Disbursement this Period
	Peru Purana of Diahurament	IN	46970-		60.00
	Purpose of Disbursement meals			007	Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburs	ement For:			IN KIND: MEALS
	Senate	Primary	General		IN MIND. WILALO
	President State: District:	Other (spe	city) 🔻		
Г	State. DISTITUTE.				
l _s	UBTOTAL of Disbursements This Page (optional)				1213.20

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SCHEDULE B (FEC Form 3		Use seperate schedule(s)			NUMBER: PAGE 44 / 150	
IT	EMIZED DISBURSEMEN	TS		category of the Summary Page	(CHECK	only one) X 17 18 19a 19b 20a 20b 20c 21
						on for the purpose of solicating contributions o solicit contributions from such committee
\setminus	NAME OF COMMITTEE (In Full)					
$ \rangle$	Mike Pence Committee					
Α.	Full Name (Last, First, Middle Initial) D.W. Johns Electric					Transaction ID: 70411.E12490 Date of Disbursement
	Mailing Address 1285 S. 400 E.					0 3 1 4 7 2 0 0 7
	City Anderson		State IN	Zip Code 46017-		Amount of Each Disbursement this Period
	Purpose of Disbursement office maintenance				001	356.97 Refund or Disposal of Excess
	Candidate Name				Category/ Type	
	Office Sought: House Senate President	Disburse	ement For: Primary Other (spe	General ▼		OFFICE MAINTENANCE
	State: District:					
В.	Full Name (Last, First, Middle Initial) Conservative Victory Fund PAC					Transaction ID: 70413.C12760IK Date of Disbursement
	Mailing Address P.O. Box 1524	5				03 0 2 7 2 0 0 7
	City Washington		State DC	Zip Code 20003-		Amount of Each Disbursement this Period
	Purpose of Disbursement faxing and annoucement				003	433.55 Refund or Disposal of Excess
	Candidate Name				Category/ Type	=
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General ecify) ▼		IN KIND: FAXING AND ANNOU- CEMENT
_	State: District:					
C.	Full Name (Last, First, Middle Initial) A.B. LLC					Transaction ID: 70411.E12595 Date of Disbursement
	Mailing Address 21 W 8TH ST					01 0 1 0 7 2 0 0 7
	City Anderson		State IN	Zip Code 46016-		Amount of Each Disbursement this Period
	Purpose of Disbursement office rent				001	300.00 Refund or Disposal of Excess
	Candidate Name				Category/ Type	=
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General		OFFICE RENT
	State: District:					
s	UBTOTAL of Disbursements This Page	e (optional) .				1090.52

SCHEDULE B (FEC Form 3)	Use seperate schedule(s)		NUMBER: PAGE 45 / 150
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	y one) X 17
Any Information copied from such Reports and Stat or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full) Mike Pence Committee			
Full Name (Last, First, Middle Initial) A. B. LLC			Transaction ID: 70411.E12596 Date of Disbursement
Mailing Address 21 W 8TH ST			$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 0 & 2 & M \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ 0 & 0 & 2 \end{smallmatrix} & \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 & Y \end{bmatrix}$
City Anderson	State Zip Code IN 46016-		Amount of Each Disbursement this Period
Purpose of Disbursement office rent Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disbut Senate President State: District:	rsement For: Primary General Other (specify)	.,,,,,	OFFICE RENT
Full Name (Last, First, Middle Initial) 3. A.B. LLC			Transaction ID: 70411.E12597 Date of Disbursement
Mailing Address 21 W 8TH ST			$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
City Anderson	State Zip Code IN 46016-		Amount of Each Disbursement this Period
Purpose of Disbursement office rent Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: Senate President State: District:	rsement For: Primary General Other (specify) ▼		OFFICE RENT
Full Name (Last, First, Middle Initial) Jerry Alexander			Transaction ID: 70411.E12506 Date of Disbursement
Mailing Address 1410 VanBuskirk			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & I \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & T \end{smallmatrix} \end{bmatrix}$
City Anderson	State Zip Code IN 46011-		Amount of Each Disbursement this Period
Purpose of Disbursement salary		001	271.94 Refund or Disposal of Excess
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President State: District:	rsement For: Primary General Other (specify) ▼		SALARY
SUBTOTAL of Disbursements This Page (optional	l)	>	871.94
TOTAL This Period (last page this line number on	ly))	

0				•		
SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		Use seperate schedule	e(s)	-	NUMBER: PAGE 46 / 150	
		for each category of the Detailed Summary Page		(check only o	<u> </u>	
	y Information copied from such Reports and State for commercial purposes, other than using the nan					
\setminus	NAME OF COMMITTEE (In Full)					
/	Mike Pence Committee					
Α.	Full Name (Last, First, Middle Initial) Jerry Alexander				Transaction ID: 70411.E12507 Date of Disbursement	
	Mailing Address 1410 VanBuskirk				$\begin{bmatrix} \begin{smallmatrix} M & 1 & M \\ 0 & 1 & M \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 8 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$	
	City	State Zip Code			Amount of Each Disbursement this Period	
	Anderson	IN 46011-			271.95	
	Purpose of Disbursement salary			001	Refund or Disposal of Excess	
	Candidate Name			Category/	Contributions Required Under	
				Туре	11 C.F.R. 400.53	
		ement For: Primary General	val.		SALARY	
	Senate President	Primary General Gener	rai			
	State: District:	(op-on.)) \				
_	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12508	
	Jerry Alexander	Date of Disbursement				
	Mailing Address 1410 VanBuskirk				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & I \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & D \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$	
	City	State Zip Code			Amount of Each Disbursement this Period	
	Anderson	IN 46011-	_		116.54	
	Purpose of Disbursement salary			001	Refund or Disposal of Excess	
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disburs Senate President	ement For: Primary Gener Other (specify)	ral		SALARY	
	State: District:	- taner (epistery) - V				
_	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12509	
C.	Jerry Alexander				Date of Disbursement	
	Mailing Address 1410 VanBuskirk				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & I \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ Z & Z \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & Y \end{smallmatrix} \end{bmatrix}$	
	City Anderson	State Zip Code IN 46011-			Amount of Each Disbursement this Period	
	Purpose of Disbursement				116.55	
	Salary Candidate Name	001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Disburs Senate President	ement For: Primary Gener Other (specify)	ral	21 -	SALARY	
	State: District:	_ ctrior (opcorry) \				
S	UBTOTAL of Disbursements This Page (optional)				505.04	

91	CHEDULE B (FEC Form 3)			1	
			erate schedule(s)	FOR LINE (check only	NUMBER: PAGE 47 / 150
Ш	EMIZED DISBURSEMENTS		category of the Summary Page	_ i `	X 17
	y Information copied from such Reports and Stator commercial purposes, other than using the n				
\setminus	NAME OF COMMITTEE (In Full)				
	Mike Pence Committee				
_	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12510
Α.	Jerry Alexander				Date of Disbursement
	Mailing Address 1410 VanBuskirk				$\begin{bmatrix} \begin{smallmatrix} M & 1 & M \\ 0 & 1 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 & 9 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
	City	State	Zip Code		Amount of Each Disbursement this Period
	Anderson	IN	46011-		116.54
	Purpose of Disbursement salary			001	Refund or Disposal of Excess
	Candidate Name			Category/	Contributions Required Under
				Туре	11 C.F.R. 400.53
	ÿ	ursement For:	Cananal		SALARY
	Senate President	Other (spe	General		
	State: District:	Other (ope	,o.i.y) \		
_	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12511
B.	Jerry Alexander				Date of Disbursement
	Mailing Address 1410 VanBuskirk				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & Z \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & D \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & V & Y \end{smallmatrix} \end{bmatrix}$
	City	State	Zip Code		Amount of Each Disbursement this Period
	Anderson	IN	46011-		116.55
	Purpose of Disbursement salary			001	Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disbu	ursement For:			SALARY
	Senate	Primary	General		O/LE/TITI
	State: President District:	Other (spe	есіту) 🔻		
	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12512
C.	Jerry Alexander				Date of Disbursement
	Mailing Address 1410 VanBuskirk				$\begin{bmatrix} \begin{smallmatrix} M & M \\ D & Z \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & Z \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & D & D \end{smallmatrix} \end{bmatrix} \ \ 7$
	City Anderson	State IN	Zip Code 46011-		Amount of Each Disbursement this Period
	Purpose of Disbursement				116.54
	Salary Candidate Name			O01 Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disbu	ursement For:		Туре	
	Senate Disbl	Primary	General		SALARY
	President	Other (spe	ecify)		
_	State: District:				
S	UBTOTAL of Disbursements This Page (option	al)			349.63

S	CHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE	NUMBER: PAGE 48 / 150
IT	EMIZED DISBURSEMENTS	for each category of the	(check on	<u> </u>
		Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21
An	y Information copied from such Reports and State	ements may not be sold or use	d by any person	
	for commercial purposes, other than using the na			
\setminus	NAME OF COMMITTEE (In Full)			
	Mike Pence Committee			
Α.	Full Name (Last, First, Middle Initial) Jerry Alexander			Transaction ID: 70411.E12513 Date of Disbursement
	Mailing Address 1410 VanBuskirk			$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ D & Z \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & D \\ Z & D & D \end{smallmatrix} D \end{smallmatrix} $
	City Anderson	State Zip Code IN 46011-		Amount of Each Disbursement this Period
	Purpose of Disbursement			116.55
	salary		001	Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disbur Senate President	sement For: Primary General Other (specify) ▼		SALARY
	State: District:			
В.	Full Name (Last, First, Middle Initial) Jerry Alexander			Transaction ID: 70411.E12514 Date of Disbursement
	Mailing Address 1410 VanBuskirk	$ \begin{bmatrix} M & 2 & M \\ 0 & 2 & M \end{bmatrix} / \begin{bmatrix} D & 2 & 6 \\ 2 & 6 \end{bmatrix} / \begin{bmatrix} Y & Y & 2 & 0 & 7 & Y \\ 2 & 0 & 0 & 7 & Y \end{bmatrix} $		
	City Anderson	State Zip Code IN 46011-		Amount of Each Disbursement this Period
	Purpose of Disbursement salary	001	116.54 Refund or Disposal of Excess	
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate	sement For: Primary General		SALARY
	President State: District:	Other (specify)		
	Full Name (Last, First, Middle Initial)			Transaction ID: 70411.E12515
C.	Jerry Alexander			Date of Disbursement
	Mailing Address 1410 VanBuskirk			0 3 0 5 7 2 0 0 7
	City Anderson	State Zip Code IN 46011-		Amount of Each Disbursement this Period
	Purpose of Disbursement		116.55	
	Salary Candidate Name	001 Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Disbur Senate President	sement For: Primary General Other (specify) ▼	Туре	SALARY
	State: District:			
s			<u>Þ</u>	349.64

0												
	CHEDULE B (FEC Form 3)	Use seperat	e schedule(s)	FOR LINE (check only	E NUMBER: PAGE 49 / 150							
IT	EMIZED DISBURSEMENTS	for each cat Detailed Su	egory of the mmary Page	I `	X 17	9a 19b 0c 21						
	y Information copied from such Reports and State for commercial purposes, other than using the nar											
abla	NAME OF COMMITTEE (In Full)											
/	Mike Pence Committee											
Α.	Full Name (Last, First, Middle Initial) Jerry Alexander				Transaction ID: 7041 Date of Disbursement							
	Mailing Address 1410 VanBuskirk				$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ 0 & 3 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 1 & 2 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{bmatrix}$							
	City Anderson		ip Code 16011-		Amount of Each Disbu	rsement this Period						
	Purpose of Disbursement					116.54						
	salary Candidate Name	001 Category/ Type	Refund or Disposa Contributions Requ 11 C.F.R. 400.53									
	Office Sought: House Disbury Senate President	Primary Other (specif	General y) ▼		SALARY							
	State: District:											
В.	Full Name (Last, First, Middle Initial) Jerry Alexander				Transaction ID: 7041 Date of Disbursement							
	Mailing Address 1410 VanBuskirk		03 / 14	^Y 2007 ^Y								
	City Anderson		ip Code 16011-		Amount of Each Disbu	rsement this Period						
	Purpose of Disbursement travel reimbursement			002 Refund or Disposal of Excess								
	Candidate Name		Category/ Type Contributions Required Under									
	Senate President	sement For: Primary Other (specif	General y) ▼		TRAVEL REIMBUR	SEMENT						
	State: District:											
C.	Full Name (Last, First, Middle Initial) Jerry Alexander				Transaction ID: 7041 Date of Disbursement	1.E12517						
	Mailing Address 1410 VanBuskirk				03 / 19 /	[°] 2007						
	City Anderson	State Z	ip Code 16011-		Amount of Each Disbu	rsement this Period						
	Purpose of Disbursement salary		Г	001	Refund or Disposa	116.55						
	Candidate Name			Category/ Type	Contributions Requ 11 C.F.R. 400.53							
	Office Sought: House Disbury Senate President	Primary Other (specif	General y) ▼		SALARY							
_	State: District:		· · · •									
s	UBTOTAL of Disbursements This Page (optional)				366.47						

S	CHEDULE B (FEC Form 3)	Use sep	erate schedule(s)		-	E NUMBER: PAGE 50 / 150						
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page		(check only	y one) X 17						
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam											
\sum	NAME OF COMMITTEE (In Full)											
	Mike Pence Committee											
Α.	Full Name (Last, First, Middle Initial) Jerry Alexander Mailing Address 1410 VanBuskirk					Transaction ID: 70411.E12518 Date of Disbursement 0 3						
	City Anderson	State IN	Zip Code 46011-			Amount of Each Disbursement this Period						
	Purpose of Disbursement					116.54						
	Salary Candidate Name				001 ategory/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53						
	Senate President	ement For: Primary Other (spe	General ecify) ▼			SALARY						
_	State: District: Full Name (Last, First, Middle Initial)											
В.	Ron Arnold		Transaction ID: 70411.E12519 Date of Disbursement									
	Mailing Address 3709 Tulip St.					$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y \\ 2 & O & O & Y \end{smallmatrix} \end{bmatrix}$						
	City Anderson	State IN	Zip Code 46011-			Amount of Each Disbursement this Period						
	Purpose of Disbursement salary	Г	001	7200.00 Refund or Disposal of Excess								
	Candidate Name				ategory/ Type	Contributions Required Under 11 C.F.R. 400.53						
	Office Sought: House Disburs Senate President	ement For: Primary Other (spe	General			SALARY						
	State: District:	Other (spi	SCIIY) ₩									
C.	Full Name (Last, First, Middle Initial) Ron Arnold					Transaction ID: 70411.E12520 Date of Disbursement						
	Mailing Address 3709 Tulip St.					01 M / 16 / Y Y Y Y Y						
	City Anderson	State IN	Zip Code 46011-			Amount of Each Disbursement this Period						
	Purpose of Disbursement	204	7293.00									
	Salary Candidate Name		001 ategory/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53								
	Senate	ement For: Primary	General			SALARY						
	President State: District:	Other (spe	ecify) 🔻									
s	UBTOTAL of Disbursements This Page (optional)				<u>►</u>	14609.54						

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5	CHEDULE B (FEC Form	3)	Use sepe	erate schedule(s)		E NUMBER: PAGE 51 / 150						
IT	EMIZED DISBURSEMEN	ITS	for each	category of the Summary Page	(check on	X 17						
				for the purpose of solicating contributions olicit contributions from such committee								
\setminus	NAME OF COMMITTEE (In Full)											
\rangle	Mike Pence Committee											
_	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12603							
Α.	Ron Arnold					Date of Disbursement						
	Mailing Address 3709 Tulip St.					$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ D & Z \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & D & Y \end{smallmatrix} \end{bmatrix} $						
	City		State	Zip Code		Amount of Each Disbursement this Period						
	Anderson		IN	46011-								
	Purpose of Disbursement					277.67						
	Travel Reimbursement Candidate Name		002	Refund or Disposal of Excess Contributions Required Under								
	Candidate Name	Category/ Type	11 C.F.R. 400.53									
	Office Sought: House	Disburse	ement For:		.) -							
	Senate		Primary	General		TRAVEL REIMBURSEMENT						
	President		Other (spe	ecify)								
	State: District:											
В.	Full Name (Last, First, Middle Initial)					Transaction ID: 70411.E12604						
Ь.	Ron Arnold					Date of Disbursement						
	Mailing Address 3709 Tulip St.					$ \begin{bmatrix} 0 & 2 & M \\ 0 & 2 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & D \\ 0 & 0 & 2 \end{bmatrix} / \begin{bmatrix} 0 & Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{bmatrix} $						
	City		State	Zip Code		Amount of Each Disbursement this Period						
	Anderson		IN	46011-		107.00						
	Purpose of Disbursement travel reimbursement		002	107.39								
	Candidate Name		Category/	Refund or Disposal of Excess Contributions Required Under								
	Canada Namo			Type	11 C.F.R. 400.53							
	Office Sought: House	Disburse	ement For:			TRAVEL REIMBURSEMENT						
	Senate		Primary	General		THAVEL REINIDORGENIEM						
	State: President District:		Other (spe	ecify) 🔻								
	State: District: Full Name (Last, First, Middle Initial)											
C.	Ron Arnold					Transaction ID: 70411.E12605 Date of Disbursement						
	Mailing Address 3709 Tulip St.					$ \begin{bmatrix} M & M \\ 0 & 2 \end{bmatrix} \begin{bmatrix} D & 2 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$						
	City Anderson		State IN	Zip Code 46011-		Amount of Each Disbursement this Period						
	Purpose of Disbursement					24.62						
	travel reimbursement				002	Refund or Disposal of Excess						
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53						
	Office Sought: House	Disburse	ement For:			TRAVEL REIMBURSEMENT						
	Senate		Primary	General								
	State: President District:		Other (spe	ecity) 🔻								
	Otato. District.											
s	UBTOTAL of Disbursements This Pag	e (optional) .				409.68						

ııay.	s# 21930333032					
	CHEDULE B (FEC Form EMIZED DISBURSEME	-	for each	erate schedule(s) category of the Summary Page	FOR LIN (check or	E NUMBER: PAGE 52 / 150 X
						n for the purpose of solicating contributions solicit contributions from such committee
6	<u> </u>	ising the name	and addre	ss of any political	Committee to s	Solicit Continuations from Such Committee
\rangle	NAME OF COMMITTEE (In Full) Mike Pence Committee					
	Full Name (Last, First, Middle Initial)					Transaction ID: 70411.E12608
A.	Ron Arnold					Date of Disbursement
	Mailing Address 3709 Tulip S	t.				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Anderson		State IN	Zip Code 46011-		Amount of Each Disbursement this Period
	Purpose of Disbursement					325.19
	travel reimbursement				002	Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General ecify) ▼		TRAVEL REIMBURSEMENT
	State: District:					
	Full Name (Last, First, Middle Initial)	_				Transaction ID: 70411.E12607
В.	Ron Arnold					Date of Disbursement
	Mailing Address 3709 Tulip St	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				
	City Anderson	Amount of Each Disbursement this Period				
	Purpose of Disbursement	93.71				
	travel reimbursement				002	Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House	Disburse	ment For:			TRAVEL REIMBURSEMENT
	Senate		Primary	General		THE VER TENDER TO ENTER Y
	President		Other (spe	ecity) 🔻		
	State: District:					
C.	Full Name (Last, First, Middle Initial) Ron Arnold					Transaction ID: 70411.E12606 Date of Disbursement
	Mailing Address 3709 Tulip St	t.				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Anderson	Amount of Each Disbursement this Period				
	Purpose of Disbursement					24.83
	travel reimbursement				002	Refund or Disposal of Excess
	Candidate Name				Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House	Disburse	ment For:			TRAVEL REIMBURSEMENT
	Senate		Primary	General		THE TRANSPORT OF MILITARY
	President		Other (spe	ecify) 🔻		
_	State: District:					

443.73

SUBTOTAL of Disbursements This Page (optional)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 150 (check only one) X 17
		any person for the purpose of solicating contributions nmittee to solicit contributions from such committee
NAME OF COMMITTEE (In Full) Mike Pence Committee		
Full Name (Last, First, Middle Initial) A. Ron Arnold Mailing Address 3709 Tulip St.		Transaction ID: 70411.E12485 Date of Disbursement 0 3 4 2 2 7 2 0 7 7
City Anderson Purpose of Disbursement petty cash	State Zip Code IN 46011-	Amount of Each Disbursement this Period 158.34 001 Refund or Disposal of Excess
Senate President	ursement For: Primary General Other (specify)	Contributions Required Under 11 C.F.R. 400.53 PETTY CASH
State: District:		
Full Name (Last, First, Middle Initial) Ron Arnold Mailing Address 3709 Tulip St.		Transaction ID: 70411.E12609 Date of Disbursement 0 3 M / D 2 D / Y Y Y O Y Y
City Anderson	State Zip Code IN 46011-	Amount of Each Disbursement this Period
Purpose of Disbursement travel reimbursement Candidate Name	C	002 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disk Senate President State: District:	ursement For: Primary General Other (specify) ▼	TRAVEL REIMBURSEMENT
Full Name (Last, First, Middle Initial) C. Ron Arnold		Transaction ID: 70411.E12610 Date of Disbursement
Mailing Address 3709 Tulip St.		03
City Anderson	State Zip Code IN 46011-	Amount of Each Disbursement this Period
Purpose of Disbursement travel reimbursement Candidate Name	C	002 ategory/ Type 160.26 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disb Senate President State: District:	orsement For: Primary General Other (specify) ▼	TRAVEL REIMBURSEMENT
SUBTOTAL of Disbursements This Page (option		428.61

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S	CHEDULE B (FEC Form 3)	Use sepe	rate schedule(s)		-	NUMBER: PAGE 54 / 150
IT	EMIZED DISBURSEMENT	'S		category of the	(0	heck only	() 17
			Detailed S	Summary Page		Ľ	20a 20b 20c 21
	y Information copied from such Reports are for commercial purposes, other than using						
Λ	NAME OF COMMITTEE (In Full)						
17	Mike Pence Committee						
<u></u>	Full Name (Last, First, Middle Initial)						
A.	Lyle Beckwith		Transaction ID: 70413.C12757IK Date of Disbursement				
	Mailing Address 101 E. Monroe A		0 3 M / D 2 8 / Y 2 0 0 7 Y				
	City Alexandria	Sta V		Zip Code 22301-			Amount of Each Disbursement this Period
	Purpose of Disbursement catering			00	73	631.83 Refund or Disposal of Excess	
	Candidate Name			Cate Tyr	gory/	Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Senate	Disburseme	ent For: Primary	General			IN KIND: CATERING
	President		Other (spe				
В.	Full Name (Last, First, Middle Initial) Anthony Bedell						Transaction ID: 70413.C12758IK Date of Disbursement
	Mailing Address 601 Pennsylvania #200	a Ave.			$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} Y$		
	City		ate	Zip Code 20006-			Amount of Each Disbursement this Period
	Washington	D			287.00		
	Purpose of Disbursement catering			00	03	Refund or Disposal of Excess	
	Candidate Name				Cate Typ	gory/	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate	Disburseme	ent For: Primary	General			IN KIND: CATERING
	President		Other (spe				
	State: District:		` '	•			
C.	Full Name (Last, First, Middle Initial) Capitol Hill Club						Transaction ID: 70411.E12466 Date of Disbursement
	Mailing Address 300 First Street,	SE					$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} \ \begin{smallmatrix} Y \\ 2 \end{smallmatrix} \ \begin{smallmatrix} Y \\ 0 \end{smallmatrix} \ \begin{smallmatrix} Y \\ 7 \end{smallmatrix} $
	City Washington	Sta		Zip Code 20003-			Amount of Each Disbursement this Period
	Purpose of Disbursement			20000	_		619.18
	catering				QC	03	Refund or Disposal of Excess
	Candidate Name				Cate Typ		Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House	Disburseme					CATERING
	Senate President		rimary	General			
	State: District:		Other (spe	Giiy) ♥			
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	CHEDULE B (FEC Form 3)		rate schedule(s)	FOR LINE (check only	NUMBER: PAGE 55 / 150
IT	EMIZED DISBURSEMENTS		ategory of the Summary Page	_ i `	X 17
	y Information copied from such Reports and Statem for commercial purposes, other than using the name				
\rangle	NAME OF COMMITTEE (In Full) Mike Pence Committee				
Α.	Full Name (Last, First, Middle Initial) Anderson City Utilities				Transaction ID: 70411.E12629 Date of Disbursement O 2 D O 9 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 120 E. 8th St.				02 09 2007
	,	State IN	Zip Code 46016-		Amount of Each Disbursement this Period
	Purpose of Disbursement utilities			001	185.88 Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President	ment For: Primary Other (spec	☐ General		UTILITIES
	State: District:				
В.	Full Name (Last, First, Middle Initial) Anderson City Utilities				Transaction ID: 70411.E12630 Date of Disbursement
	Mailing Address 120 E. 8th St.				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & 4 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & O & O & 7 \end{smallmatrix} \end{bmatrix}$
	,	State IN	Zip Code 46016-		Amount of Each Disbursement this Period
	Purpose of Disbursement utilities			001	449.11 Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General Cify) ▼		UTILITIES
	State: District:				
C.	Full Name (Last, First, Middle Initial) AT& T				Transaction ID: 70411.E12567 Date of Disbursement
	Mailing Address P.O. Box 660011				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & I \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & B \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & O & O & Y \end{smallmatrix} \end{bmatrix}$
		State TX	Zip Code 75266-0011		Amount of Each Disbursement this Period
	Purpose of Disbursement				465.10
	telephone Candidate Name			001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General		TELEPHONE
	State: District:	3 a.c. (opoc	··· <i>J1</i> ▼		
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11	EMIZED DISBURSEMENTS		ch category of the ed Summary Page	_ i `	X 17					
	y Information copied from such Reports an for commercial purposes, other than using									
\setminus	NAME OF COMMITTEE (In Full)									
	Mike Pence Committee									
A.	Full Name (Last, First, Middle Initial) AT& T				Transaction ID: 70411.E12568 Date of Disbursement					
	Mailing Address P.O. Box 660011				$ \begin{bmatrix} M & M & M \\ 0 & 1 & M \end{bmatrix} \begin{bmatrix} D & 0 & 0 \\ 0 & 0 & 0 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{bmatrix} $					
	City Dallas	State TX	Zip Code 75266-0011		Amount of Each Disbursement this Period					
	Purpose of Disbursement telephone			001	39.04 Refund or Disposal of Excess					
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Senate President	Disbursement For Primary Other (s			TELEPHONE					
	State: District:									
В.	Full Name (Last, First, Middle Initial) AT& T		Transaction ID: 70411.E12569 Date of Disbursement							
	Mailing Address P.O. Box 660011		$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 0 & 2 & M \end{smallmatrix} & / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 8 \end{smallmatrix} \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$							
	City Dallas	State TX	Zip Code 75266-0011		Amount of Each Disbursement this Period					
	Purpose of Disbursement telephone			001 Refund or Disposal of Excess						
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Senate President	Disbursement For Primary Other (s			TELEPHONE					
	State: District:		, , , , , , , , , , , , , , , , , , ,							
C.	Full Name (Last, First, Middle Initial) AT& T				Transaction ID: 70411.E12570 Date of Disbursement					
	Mailing Address P.O. Box 660011				$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ O & Z \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & B \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & T \end{smallmatrix} \end{bmatrix}$					
	City Dallas	State TX	Zip Code 75266-0011		Amount of Each Disbursement this Period					
	Purpose of Disbursement telephone			001	36.05 Refund or Disposal of Excess					
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Senate President	Disbursement For Primary Other (s			TELEPHONE					
_	State: District:									
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	CHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE (check only	NUMBER: PAGE 57 / 150				
ΙΤ	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	l `	X 17 18 19a 19b 20a 20b 20c 21				
	y Information copied from such Reports and Statem for commercial purposes, other than using the name							
\rangle	NAME OF COMMITTEE (In Full) Mike Pence Committee							
Α.	Full Name (Last, First, Middle Initial) AT& T			Transaction ID: 70411.E12571 Date of Disbursement				
	Mailing Address P.O. Box 660011			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & 4 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ I & 2 & O & O & T \end{smallmatrix} \end{bmatrix}$				
	,	State Zip Code TX 75266-0011		Amount of Each Disbursement this Period				
	Purpose of Disbursement telephone		001	36.05 Refund or Disposal of Excess				
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		TELEPHONE				
	State: District:							
В.	Full Name (Last, First, Middle Initial) AT& T			Transaction ID: 70411.E12572 Date of Disbursement				
	Mailing Address P.O. Box 660011		$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$					
	,	State Zip Code TX 75266-0011		Amount of Each Disbursement this Period				
	Purpose of Disbursement telephone		001	Refund or Disposal of Excess				
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		TELEPHONE				
	State: District:							
C.	Full Name (Last, First, Middle Initial) AT& T			Transaction ID: 70413.E12649 Date of Disbursement				
	Mailing Address P.O. Box 660011			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 3 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 6 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$				
		State Zip Code TX 75266-0011		Amount of Each Disbursement this Period				
	Purpose of Disbursement telephone		001	435.47 Refund or Disposal of Excess				
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		TELEPHONE				
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	y Information copied from such Reports for commercial purposes, other than usin														
\setminus	NAME OF COMMITTEE (In Full)														
$ \rangle$	Mike Pence Committee														
Α.	Full Name (Last, First, Middle Initial) AT& T						Transaction ID: 70413.E12650 Date of Disbursement								
	Mailing Address P.O. Box 66001	1					$\begin{bmatrix} 0 & 3 & M & / & D & 1 & 6 \\ 0 & 3 & M & / & D & 1 & 6 \end{bmatrix} \begin{bmatrix} 1 & 1 & 1 & 1 & 1 \\ 0 & 1 & 1 & 1 & 1 \\ 0 & 1 & 1 & 1 & 1 \end{bmatrix}$								
	City Dallas		State TX	Zip Code 75266-0011			Amo	unt c	of Eacl	n Dis	sbur	seme	ent this	Period	
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	Candidate Name	001 ategory/ Type		ontr	nd or C ibution F.R. 4	ıs R	equi								
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General ▼			TELEPHONE								
	State: District:														
В.	Full Name (Last, First, Middle Initial) Insight Communications				ion ID isburs	_		1.E1	2626						
	Mailing Address 335 E. 10th St.		0 ^M 1	М	/ D	1 0	_ ′	Υ	ž o ŏ	7 ^Y					
	City Anderson		State IN	Zip Code 46016-			Amo	unt c	of Eacl	n Dis	sbur	seme	ent this	Period	
	Purpose of Disbursement utilities	001 Refund or Disposal of Excess			55.	.69									
	Candidate Name				Category/ Type Contributions Required Under										
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General			UTIL	ITIE	S						
	State: District:														
C.	Full Name (Last, First, Middle Initial) Insight Communications								ion ID isburs	-		1.E1	2627		
	Mailing Address 335 E. 10th St.						0 ^M 2	М	/ D	0 9	_ ′	Υ	žoŏ	7 ^Y	
	City Anderson		State IN	Zip Code 46016-			Amo	unt c	of Eacl	n Dis	sbur	seme	ent this	Period	
	Purpose of Disbursement utilities				Г	001	L	Refur	nd or D)isno	osal	of Ex	55.	.69	
	Candidate Name					ategory/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53								
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General	UTILITIES										
	State: District:			-											
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91	CHEDULE B (FEC Form 3)								
			erate schedule(s)	FOR LINE (check only	NUMBER: PAGE 59 / 150				
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	y Information copied from such Reports and Sta for commercial purposes, other than using the na								
Λ	NAME OF COMMITTEE (In Full)								
/	Mike Pence Committee								
	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12628				
A.	Insight Communications				Date of Disbursement				
	Mailing Address 335 E. 10th St.				$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ 1 & 4 & M \end{smallmatrix} & \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 & Y \end{bmatrix}$				
	City Anderson	State IN	Zip Code 46016-		Amount of Each Disbursement this Period				
	Purpose of Disbursement		10010		55.69				
	utilities			001	Refund or Disposal of Excess				
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Disbu	rsement For:			UTILITIES				
	Senate President	Primary Other (and	General		onemes				
	State: District:	Other (spe	ciry) 🔻						
	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12469				
В.	Debbie Czarniecki		Date of Disbursement						
	Mailing Address 903 FOREST DR.		$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 0 & 2 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$						
	City	State	Zip Code		Amount of Each Disbursement this Period				
	Anderson	IN	46011-		264.57				
	Purpose of Disbursement catering			007	Refund or Disposal of Excess				
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Disbu	rsement For: Primary	General		CATERING				
	President	Other (spe							
	State: District:		, ,						
_	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12467				
C.	Hunan Dynasty				Date of Disbursement				
	Mailing Address 203 Pennslyvania Sou	th East			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & T \end{smallmatrix} \end{bmatrix}$				
	City Washington	State DC	Zip Code 20003-		Amount of Each Disbursement this Period				
	Purpose of Disbursement				542.40				
	Candidate Name			003	Refund or Disposal of Excess Contributions Required Under				
	Candidate Name			Category/ Type	11 C.F.R. 400.53				
	Office Sought: House Disbu	rsement For:			CATERING				
	Senate	Primary	General		OATERING				
	State: President District:	Other (spe	ecity) 🔻						
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s	UBTOTAL of Disbursements This Page (options	al)			862.66				

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								for the purpose of solica dicit contributions from s				
Λ	NAME OF COMM											
/	Mike Pence Cor	mmittee										
<u></u>	Full Name (Last, F	irst, Middle Initial)						Transaction ID: 704				
A.	Www.earthlink.i							Date of Disbursemen	nt	I		
	Mailing Address	1375 Peachtree Level A		01 22 2007								
	City Atlanta			State GA	Zip Code 30309-			Amount of Each Disbursement this Perio				
	Purpose of Disburs telephone	sement			001	Refund or Dispos	162.11					
	Candidate Name			Cat	tegory/ ype	Contributions Re	equired Under					
	Office Sought:	House Senate	Disburser	nent For: Primary	General			TELEPHONE				
	State:	President District:		Other (spe	ecify)							
_	Full Name (Last, F											
В.								Transaction ID: 704 Date of Disbursement	nt			
	Mailing Address 1375 Peachtree St. Level A							03 / 14	Ž O O T			
	City Atlanta			State GA	Zip Code 30309-			Amount of Each Dis	bursement this Peri	iod		
	Purpose of Disbursement								163.25			
	telephone						001	Refund or Dispos				
	Candidate Name					tegory/ ype	Contributions Re					
	Office Sought:	House Senate	Disburser	nent For: Primary	General			TELEPHONE				
		President		Other (spe	ecify) 🔻							
		District:										
C.	Full Name (Last, F Www.earthlink.							Transaction ID: 704 Date of Disbursement	nt			
	Mailing Address	1375 Peachtree Level A	St.					03 / 14	^Y ŽOÝ7 ^Y			
	City Atlanta			State GA	Zip Code 30309-			Amount of Each Dis		iod		
	Purpose of Disburs telephone	sement					001	Refund or Dispos	180.02 sal of Excess			
	Candidate Name						tegory/ ype	Contributions Re	equired Under			
	Office Sought:	House	Disburser			•		TELEPHONE				
		Senate President		Primary Other (spe	General							
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SCHEDULE B (FECFORIII 3)	Lica canarata cahadula(c) I	FOR LINE NUMBER: PAGE 61 / 150						
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	check only one)						
Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam								
NAME OF COMMITTEE (In Full) Mike Pence Committee								
Full Name (Last, First, Middle Initial) Erie Insurance Group Mailing Address 100 Erie Ins. Pl.		Transaction ID: 70411.E12483 Date of Disbursement D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
City Erie	State Zip Code PA 16530-	Amount of Each Disbursement this Period						
Purpose of Disbursement insurance Candidate Name	Cat	01 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53						
Senate President State: District:	ement For: Primary General Other (specify)	INSURANCE						
Full Name (Last, First, Middle Initial) Frie Insurance Group		Transaction ID: 70411.E12631 Date of Disbursement						
Mailing Address 100 Erie Ins. Pl.		03 M / D22 / Y 2007						
City Erie Purpose of Disbursement insurance		Amount of Each Disbursement this Period 1403.00 Refund or Disposal of Excess						
Candidate Name	T	egory/ /pe Contributions Required Under 11 C.F.R. 400.53						
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	INSURANCE						
Full Name (Last, First, Middle Initial) Federal Express		Transaction ID: 70411.E12593 Date of Disbursement						
Mailing Address 924 S. Shady Grove Rd.		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$						
City Memphis	State Zip Code TN 38120-	Amount of Each Disbursement this Period						
Purpose of Disbursement shipping Candidate Name	Cate	01 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53						
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)	SHIPPING						
SUBTOTAL of Disbursements This Page (optional)								
TOTAL This Period (last page this line number only)								

SCHEDULE B (FEC Form 3)					R LINE N	IIMRE	B.			PAGI	E 62 / 150		
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name												
Λ	NAME OF COMMITTEE (In Full)												
\mathbb{Z}	Mike Pence Committee												
Α.	Full Name (Last, First, Middle Initial)					Trans				1.E1	2594		
Λ.	Federal Express					Date o	_			V	V V V		
	Mailing Address 924 S. Shady Grove Rd.					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$					ž 0 0 7 °		
		State	Zip Code			Amou	nt of	Each	Disbu	rseme	ent this Period		
	Memphis Purpose of Disbursement	TN	38120-							-	52.23		
	shipping			001		Re	efunc	l or Di	sposa	l of Ex			
	Candidate Name			Categor Type		Co	ontrib	utions .R. 40	Requ	uired U	Inder		
	°	ment For:				SHIPE	PINC	3					
	Senate President	Primary Other (spec	General										
	State: District:	- 1 (- p	···)/ \										
	Full Name (Last, First, Middle Initial)					Trans	actio	on ID:	7041	1.E1	2468		
В.	Toles Flowers					Date o							
	Mailing Address 627 Nichol Ave.					0 ^M 1	M /	^D 1	0 /	Y	žoŏ7Ť		
	,	State IN	Zip Code 46016-			Amou	nt of	Each	Disbu	rseme	ent this Period		
	Purpose of Disbursement flowers				007 Refund or Disposal of Ex				I of Ex	242.74			
	Candidate Name				ry/	Contributions Required Under 11 C.F.R. 400.53							
	v H —	ment For:				FLOW	VFR	S					
	Senate President	Primary Other (spec	General			. 201	• =	•					
	State: District:	Other (spec	olly) ♥										
	Full Name (Last, First, Middle Initial)					Trans	actio	n ID:	7041	1 F1	2482		
C.	St. Vincent Hospital Fund					Date of			-		-		
	Mailing Address 14 S. Anderson St.						$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ I & 5 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$						
		State	Zip Code			Amou	nt of	Each	Disbu	rseme	ent this Period		
		IN	46036-			_	-		-		450.00		
	Purpose of Disbursement Advertising					B.	ofund	l or Di	enoca	L of Ev			
	Candidate Name	O04 Categor Type	-	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53									
	Office Sought: House Disburse			71 -		ADVERTISING							
	Senate	Primary	General			, \D V L	-1111	JIIVC	4				
	State: District:	Other (spec	спу) 🔻										
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S	CHEDULE B (FEC Form 3)	Use seperate schedule(s)		NUMBER: PAGE 63 / 150						
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	y one) X 17 18 19a 19b 20a 20b 20c 21						
	y Information copied from such Reports and Statem for commercial purposes, other than using the name									
\rangle	NAME OF COMMITTEE (In Full) Mike Pence Committee									
۹.	Full Name (Last, First, Middle Initial) Huckaby- Davis-Lisker			Transaction ID: 70411.E12453 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	Mailing Address Suite 115 228 South Washington St	reet		$ \begin{bmatrix} M & M & M \\ 0 & 1 & M \end{bmatrix} \begin{bmatrix} D & 1 & D \\ 1 & 0 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{bmatrix} $						
	•	State Zip Code VA 22314-		Amount of Each Disbursement this Period						
	Purpose of Disbursement Consulting F.E.C. Compliance Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53						
	Office Sought: House Senate President State: District:	ment For: Primary General Other (specify)	. ypc	CONSULTING F.E.C. COMPLIA- NCE						
3.	Full Name (Last, First, Middle Initial) LM Direct			Transaction ID: 70411.E12592 Date of Disbursement M 3 M / D 0 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	Mailing Address 1426 E. 22nd St.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & O \\ O & 9 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & 7 \end{smallmatrix} \end{bmatrix}$						
	•	State Zip Code IN 46016-		Amount of Each Disbursement this Period						
	Purpose of Disbursement mail service	2242.82 Refund or Disposal of Excess								
	Candidate Name		003 Category/ Type	Contributions Required Under 11 C.F.R. 400.53						
	Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼		MAIL SERVICE						
Э.	Full Name (Last, First, Middle Initial) Cadick Williams MacCallister Ford Agency			Transaction ID: 70411.E12457 Date of Disbursement						
	Mailing Address 2905 E. 46th Street			$\begin{bmatrix} \begin{smallmatrix} M & 1 & M \\ 0 & 1 & M \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ 0 & 1 & 0 \end{smallmatrix} & \begin{smallmatrix} D & V & Y & Y & Y & Y \\ 2 & 0 & 0 & 7 & Y \end{bmatrix}$						
	•	State Zip Code IN 46205-		Amount of Each Disbursement this Period						
	Purpose of Disbursement Accounting Services		001	1205.00 Refund or Disposal of Excess						
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53						
	Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼		ACCOUNTING SERVICES						
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T	OTAL This Period (last page this line number only)									

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S	CHEDULE B (FEC Form 3)	Use sepe	rate schedule(s)	_	E NUMBER: PAGE 64 / 150
IT	EMIZED DISBURSEMENT	ΓS		category of the	(check on	
			Detailed	Summary Page		20a 20b 20c 21
	y Information copied from such Reports a for commercial purposes, other than using					for the purpose of solicating contributions olicit contributions from such committee
Λ	NAME OF COMMITTEE (In Full)					
17	Mike Pence Committee					
<u></u>	Full Name (Last, First, Middle Initial)					
A.	TermNet Merchant Services, Inc.					Transaction ID: 70411.E12461 Date of Disbursement
	Mailing Address P.o. Box 723200)				$\begin{bmatrix} M & M & M \\ O & 1 & M \end{bmatrix} / \begin{bmatrix} D & D & D \\ O & 3 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{bmatrix}$
	City Atlanta	Sta G	ate A	Zip Code 31139-0200		Amount of Each Disbursement this Period
	Purpose of Disbursement					28.08
	bank fees Candidate Name				001 Category/	Refund or Disposal of Excess Contributions Required Under
	Candidate Name				Type	11 C.F.R. 400.53
	Office Sought: House	Disburseme				BANK FEES
	Senate President		rimary Other (spe	General		
	State: District:		otilei (spe	City) \blacktriangledown		
	Full Name (Last, First, Middle Initial)					Transaction ID: 70413.E12646
B.	TermNet Merchant Services, Inc.					Date of Disbursement
	Mailing Address P.o. Box 723200)				$\begin{bmatrix} M & M & M \\ O & 1 & M \end{bmatrix} / \begin{bmatrix} D & O & D \\ O & 7 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ Z & O & O & 7 \end{bmatrix}$
	City		ate	Zip Code		Amount of Each Disbursement this Period
	Atlanta	G	A	31139-0200		25.00
	Purpose of Disbursement bank fee				001	Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House	Disburseme				BANK FEE
	Senate President		rimary Other (spe	General		
	State: District:		outer (ope	S y / ∀		
	Full Name (Last, First, Middle Initial)					Transaction ID: 70413.E12647
C.	TermNet Merchant Services, Inc.					Date of Disbursement
	Mailing Address P.o. Box 723200)				$\begin{bmatrix} \begin{array}{cccccccccccccccccccccccccccccccccccc$
	City Atlanta	Sta G	ate A	Zip Code 31139-0200		Amount of Each Disbursement this Period
	Purpose of Disbursement				•	25.29
	bank fee Candidate Name				001	Refund or Disposal of Excess Contributions Required Under
	Carididate Name				Category/ Type	11 C.F.R. 400.53
	Office Sought: House	Disburseme	ent For:			BANK FEE
	Senate		rimary	General		D'ANT LEE
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г	State. DISTRICT.					
ا	LIRTOTAL of Dishursements This Page	(ontional)			_	78.37

Transaction II Benitzed Disbursement Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of or for commercial purposes, other than using the name and address of any political committee to solicit contributions of MAME OF COMMITTEE (In Full) Mike Pence Committee Full Name (Last, First, Middle Initial) Transaction II Date of Disbursement bank fee Candidate Name Office Sought: Bull Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial) Bull Name (Last, First, Middle Initial) City Condidate Name Office Sought: Bull Name (Last, First, Middle Initial) City Condidate Name Office Sought: Disbursement for: Condidate Name Office Sought: Disbursement for: Purpose of Disbursement telephone Candidate Name Office Sought: Disbursement for: Purpose of Disbursement telephone Candidate Name Office Sought: Disbursement for: Disbursement for: Primary General Disbursement for: Contribution 11 C.F.R. 4 Transaction II Date of Disbursement for: Contribution 11 C.F.R. 4 Transaction II Refund or Contribution 11 C.F.R. 4 Transaction II Date of Disbursement for: Contribution 11 C.F.R. 4 Transaction II Date of Disbursement for: Disbursement for: Contribution 11 C.F.R. 4 Transaction II Date of Disbursement for: Contribution 11 C.F.R. 4 Transaction II Date of Disbursement for: Contribution 11 C.F.R. 4 Transaction II Date of Disbursement for: Contribution 11 C.F.R. 4 Transaction II Date of Disbursement for: Contribution 11 C.F.R. 4 Transaction II Date of Disbursement for: Contribution 12 C. Advantage Payroll Service Mailing Address 2905 E. 46th St. City Date of Disbursement for: Date	NE NUMBER: PAGE 65 / 150 only one)					
or for commercial purposes, other than using the name and address of any political committee to solicit contributions f NAME OF COMMITTEE (In Full) Mike Pence Committee Full Name (Last, First, Middle Initial) City Atlanta Bank fee Candidate Name Office Sought: House President President State: District: Full Name (Last, First, Middle Initial) Nextel Mailing Address P.O. Box 172408 City State Zip Code CO B0217- Purpose of Disbursement bank fee City Denver CO B0217- Purpose of Disbursement telephone Candidate Name City State Zip Code CO B0217- Purpose of Disbursement telephone Candidate Name City State Zip Code CO B0217- Purpose of Disbursement telephone Candidate Name Office Sought: House Disbursement For: Senate Primary General Category' Type Office Sought: House Disbursement For: Senate Primary General Category' Type Office Sought: House Disbursement For: Senate Primary General Category' Type Office Sought: House Disbursement For: Senate Primary General Category' Type Office Sought: House Disbursement For: Disbursement For: Senate Primary General Category' Type Office Sought: House Disbursement For: Disbursement For: Senate Primary General Category' Type Office Sought: House Disbursement For: District: Transaction ID Advantage Payroll Service Date of Disbursement For: D	19a 19b 20c 21					
Mike Pence Committee Full Name (Last, First, Middle Initial) A. TermNet Merchant Services, Inc. Mailing Address P.o. Box 723200 City Atlanta District: Full Name (Last, First, Middle Initial) Nextel City Denver CO 80217- Purpose of Disbursement telephone Candidate Name District: Full Name (Last, First, Middle Initial) Nextel District: Mailing Address P.O. Box 172408 City Denver CO 80217- Purpose of Disbursement telephone Candidate Name District: District: District: Full Name (Last, First, Middle Initial) Nextel Transaction ID Date of Disbursement telephone Candidate Name Disbursement For: Purpose of Disbursement telephone Candidate Name Disbursement For: Senate Primary General President State Zip Code CO 80217- Purpose of Disbursement telephone Candidate Name Transaction ID Date of Disbursement Telephone Candidate Name Amount of Eac Full Name (Last, First, Middle Initial) Advantage Payroll Service Mailing Address 2905 E. 46th St. City State Zip Code ID Date of Disbursement Date of Disbursement Date of Disbursement Amount of Eac						
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Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼	RVICE					
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SUBTOTAL of Disbursements This Page (optional)	632.97					

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abla	NAME OF COMMITTEE (In Full)												
\backslash	Mike Pence Committee												
Α.	Full Name (Last, First, Middle Initial) Advantage Payroll Service								on ID		111.E	125	47
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	Mailing Address 2905 E. 46th St.						0 1		() 1		2 (o ŏ 7 °
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	Indianapolis		IN	46205-				-	-				10.1.00
	Purpose of Disbursement payroll taxes				Г	001	B	efun	d or D	isnos	al of E	0	104.82
	Candidate Name				С	ategory/	C	ontri	bution	s Re	quired		
						Туре	11	I C.I	F.R. 40	00.53	3		
		Disburse	ment For:				PAYF	ROL	L TA	XES			
	Senate President		Primary Other (spe	General									
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В.	Advantage Payroll Service						Date	of D	isburs	emer	111.E ⁻ nt		
	Mailing Address 2905 E. 46th St.						0 ^M 1	М	/ D) 2	/ L	ž (0 0 7 °
	City		State	Zip Code 46205-			Amou	ınt o	f Each	Disl	oursem	ent	this Period
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	payroll service 001						R	efun	d or D	ispos	al of E	xces	
	Candidate Name	Category/						Contributions Required Under 11 C.F.R. 400.53					
	- I	Disburse	ment For:			71	PAYE	ROI	LSE	RVI	CF.		
	Senate		Primary	General			. , , , , ,						
	President State: District:		Other (spe	ecity)									
_	Full Name (Last, First, Middle Initial)									70		405	0.5
C.	Advantage Payroll Service								טו noi isburs	_	111.E [.] nt	125	35
	Mailing Address 2905 E. 46th St.						о ^м 1	М	/ D	8 (/ Y	ž	0 0 7 Y
	City Indianapolis		State IN	Zip Code 46205-			Amou	ınt o	f Each	Disl	oursem	ent	this Period
	Purpose of Disbursement												27.16
	payroll service				L	001					al of E		
	Candidate Name				С	Category/ Type Contributions Required Under 11 C.F.R. 400.53					er		
	Office Sought: House	Disburse	ment For:				PΔVE	ROI	QE	B\/I	CF.		
	Senate	Primary General				PAYROLL SERVICE							
	State: President District:	Ш	Other (spe	ecify)									
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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	(check onl	NUMBER: PAGE 67 / 150 y one) X 17 18 19a 19b 20a 20b 20c 21				
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam							
\rangle	NAME OF COMMITTEE (In Full) Mike Pence Committee							
Α.	Full Name (Last, First, Middle Initial) Advantage Payroll Service Mailing Address 2905 E. 46th St.			Transaction ID: 70411.E12548 Date of Disbursement M M M / D D D / Y Y Y O Y O T				
	City Indianapolis Purpose of Disbursement payroll taxes	State Zip Code IN 46205-	001	Amount of Each Disbursement this Period 404.80 Refund or Disposal of Excess				
	Candidate Name Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)	Category/ Type	Contributions Required Under 11 C.F.R. 400.53 PAYROLL TAXES				
В.	Full Name (Last, First, Middle Initial)			Transaction ID: 70411.E12536				
	Mailing Address 2905 E. 46th St.			Date of Disbursement M 1 0 1 The state of Disbursement Th				
	City Indianapolis	State Zip Code IN 46205-		Amount of Each Disbursement this Period				
	Purpose of Disbursement payroll service Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: Senate President State: Disburse	ement For: Primary General Other (specify)	71	PAYROLL SERVICE				
C.	Full Name (Last, First, Middle Initial) Advantage Payroll Service			Transaction ID: 70411.E12549 Date of Disbursement				
	Mailing Address 2905 E. 46th St.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & D \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ I & I & I \end{smallmatrix} \end{bmatrix} \ \ \mathbf{Z} \ \ O \ \ O \ \ I \ \ \\ \end{bmatrix}$				
	City Indianapolis Purpose of Disbursement	State Zip Code IN 46205-		Amount of Each Disbursement this Period 328.92				
	payroll taxes Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Senate President	ement For: Primary General Other (specify)		PAYROLL TAXES				
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	NAME OF COMMITTEE (In Full			oc o. a, politica								
\rangle	Mike Pence Committee	,										
_	Full Name (Last, First, Middle Init	tial)				Transac	tion ID	: 704	11.E1	 2537		
A.	Advantage Payroll Service					Date of	Disburs	emen	t		V	
	Mailing Address 2905 E. 46	6th St.				0 1		2 2		žoŏ	7	
	City Indianapolis		State IN	Zip Code 46205-		Amount	of Eacl	n Disb	urseme	nt this	Period	
	Purpose of Disbursement									27.	16	
	payroll service				001				al of Ex			
	Candidate Name				Category/ Type		F.R. 4		uired U	nder		
	Office Sought: House Senate President		ement For: Primary Other (spe	General		PAYRO	LL SE	RVIC	E			
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B.	Advantage Payroll Service					Date of	Disburs	emen	t		V	
	Mailing Address 2905 E. 46th St.							2 2	′	ž 0 ŏ	7 '	
	City Indianapolis		State IN	Zip Code 46205-		Amount	of Eacl	n Disb	urseme	nt this	Period	
	Purpose of Disbursement									328.	90	
	payroll taxes 001						Refund or Disposal of Excess Contributions Required Under					
	Candidate Name				Category/ Type		F.R. 4		juirea u	naer		
	Office Sought: House	Disburse	ement For:			PAYRO	II TA	XFS				
	Senate		Primary	General		. , , , , ,	, .	,,				
	State: President District:		Other (spe	ecity) 🔻								
	Full Name (Last, First, Middle Init	tial)				T	ID	704	44	0500		
C.	Advantage Payroll Service	iidi)				Transac Date of	Disburs	emen	t			
	Mailing Address 2905 E. 46	6th St.				0 1 M	/ D	2 9	/ Y	ž o ŏ :	7 ^Y	
	City Indianapolis		State IN	Zip Code 46205-		Amount	of Eacl	n Disb	urseme	nt this	Period	
	Purpose of Disbursement								.1.65	27.	16	
	Candidate Name	001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53									
	Office Sought: House Senate President		ement For: Primary Other (spe	General ▼		PAYRO	LL SE	RVIC	E			
_	State: District:											

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SUBTOTAL of Disbursements This Page (optional)

S	CHEDULE B (FEC Form 3)	FORLINE	NUMBER: PAGE 69 / 150							
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		Detailed	Summary Page		X 17 18 19a 19b 20a 20b 20c 21					
	y Information copied from such Reports and Sta for commercial purposes, other than using the n									
Λ	NAME OF COMMITTEE (In Full)									
\mathbb{Z}	Mike Pence Committee									
Α.	Full Name (Last, First, Middle Initial) Advantage Payroll Service				Transaction ID: 70411.E12551 Date of Disbursement					
	Mailing Address 2905 E. 46th St.									
	City Indianapolis	Zip Code 46205-		Amount of Each Disbursement this Period						
	Purpose of Disbursement	IN	10200		2305.92					
	payroll taxes			001	Refund or Disposal of Excess					
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	ÿ	ursement For:			PAYROLL TAXES					
	Senate President	Other (sp	General		77111022 778129					
	State: District:	Other (sp	Cony) \							
	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12552					
В.	Advantage Payroll Service				Date of Disbursement					
	Mailing Address 2905 E. 46th St.	01 29 7 2007								
	City Indianapolis	State IN	Zip Code 46205-		Amount of Each Disbursement this Period					
	Purpose of Disbursement payroll taxes				740.68 Refund or Disposal of Excess					
	Candidate Name			001 Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Disbu	ursement For:		1,700	PAYROLL TAXES					
	Senate	Primary	General		FATROLL TAXLS					
	President State: District:	Other (sp	ecity) $lacksquare$							
	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12554					
C.	Advantage Payroll Service				Date of Disbursement					
	Mailing Address 2905 E. 46th St.				01					
	City	State	Zip Code		Amount of Each Disbursement this Period					
	Indianapolis	IN	46205-		25.60					
	Purpose of Disbursement payroll taxes	001	Refund or Disposal of Excess							
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53							
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	y Information copied from such Reports and Stater for commercial purposes, other than using the nam											
\vdash	NAME OF COMMITTEE (In Full)											
\rangle	Mike Pence Committee											
Α.	Full Name (Last, First, Middle Initial) Advantage Payroll Service					Transaction ID: 70411.E12539 Date of Disbursement						
	Mailing Address 2905 E. 46th St.					0 2	M	0	5	/ Y	2007	
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	Senate President State: District:	Primary Other (spe	General ecify) ▼			PAYF	(OL	LIAX	ŒS			
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\	NAME OF COMMITTEE (In Full) Mike Pence Committee			
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Ī	Purpose of Disbursement payroll taxes Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	Турс	PAYROLL TAXES
B. ,	Full Name (Last, First, Middle Initial) Advantage Payroll Service Mailing Address 2905 E. 46th St.			Transaction ID: 70411.E12541 Date of Disbursement O 2 1 9 2 0 0 7
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Ī	Mailing Address 2905 E. 46th St.			$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ 0 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
_	Indianapolis	State Zip Code IN 46205-		Amount of Each Disbursement this Period 328.90
Ī	Purpose of Disbursement payroll taxes Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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V	Mike Pence Committee								
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/	Mike Pence Committee														
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C.	Advantage Payroll Service						Da	te d	of Di	sburs	eme	ent		_	
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	y Information copied from such Reports and for commercial purposes, other than using t				for the purpose of solicating contributions
\rangle	NAME OF COMMITTEE (In Full) Mike Pence Committee				
Α.	Full Name (Last, First, Middle Initial) Advantage Payroll Service				Transaction ID: 70411.E12562 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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	Senate President	Disbursement For: Primary Other (spe	General ecify) ▼	Туре	11 C.F.R. 400.53 PAYROLL TAXES
	State: District: Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12545
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C.	, , , , ,				Transaction ID: 70411.E12563 Date of Disbursement
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	y Information copied from such Reports and for commercial purposes, other than using t														
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\setminus	NAME OF COM	MITTEE (In Full)						
/	Mike Pence Co	ommittee						
Α.	Full Name (Last, Michael Richa	First, Middle Initial) rd Pence						Transaction ID: 70411.E12602 Date of Disbursement
	Mailing Address	Po Box 408						$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Anderson			State IN	Zip Code 46015-			Amount of Each Disbursement this Period
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	Candidate Name					С	ategory/ Type	Contributions Required Under 11 C.F.R. 400.53
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	Candidate Name					С	ategory/ Type	Contributions Required Under 11 C.F.R. 400.53
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C.	Postmaster	First, Middle Initial)						Transaction ID: 70411.E12591 Date of Disbursement
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	City Anderson			State IN	Zip Code 46011-			Amount of Each Disbursement this Period
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	for commercial purposes, other than using the name			
	NAME OF COMMITTEE (In Full) Mike Pence Committee			
Α.	Full Name (Last, First, Middle Initial) Paust Printers			Transaction ID: 70411.E12474 Date of Disbursement
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	Candidate Name		007 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		PRINTING SERVICES
_	State: District:			
В.	Full Name (Last, First, Middle Initial) Master Productions			Transaction ID: 70411.E12582 Date of Disbursement
	Mailing Address 9419 W. Constellation Dr	·.		02 007
	,	State Zip Code IN 46064-		Amount of Each Disbursement this Period
	Purpose of Disbursement telephone		001	10.00 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		TELEPHONE
	State: District:			
C.	Full Name (Last, First, Middle Initial) Master Productions			Transaction ID: 70411.E12462 Date of Disbursement
	Mailing Address 9419 W. Constellation Dr	·.		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
		State Zip Code IN 46064-		Amount of Each Disbursement this Period
	Purpose of Disbursement		994	42.39
	equipment purchase Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		EQUIPMENT PURCHASE
	State: District:	Other (Specify)		
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<u> </u>	NAME OF COMMITTEE (In Full)									-			
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Α.	Full Name (Last, First, Middle Initial) Master Productions				Trans Date o				70411 ment	.E12	632		
	Mailing Address 9419 W. Constellation [Dr.			$ \begin{array}{c c} & \text{M} & M$								
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	Mailing Address 9419 W. Constellation [Or.			0 2	М	/ D	0	8 / 8	Y	2007		
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	Mailing Address 9419 W. Constellation [)r.			0 3	М	/ D	1 -	^D /	Y	2007		
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Λ	NAME OF COMMITTEE (In Full)										
V	Mike Pence Committee										
Α.	Full Name (Last, First, Middle Initial) Master Productions				Transaction ID: 70411.E12585						
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	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12633						
B.	Master Productions				Date of Disbursement						
	Mailing Address 9419 W. Constellation	Dr.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 4 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & T \end{smallmatrix} \end{bmatrix} $						
	City Pendleton	State Zip Code IN 46064-			Amount of Each Disbursement this Period						
	Purpose of Disbursement		Тг		500.00						
	consultant media Candidate Name		L	001 ategory/	Refund or Disposal of Excess Contributions Required Under						
				Type	11 C.F.R. 400.53						
	Office Sought: House Disbur	sement For: Primary General			CONSULTANT MEDIA						
	President	Other (specify)									
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C.	Full Name (Last, First, Middle Initial) Internal Revenue Service				Transaction ID: 70411.E12601 Date of Disbursement						
	Mailing Address 100 N SENATE AVE.				$\begin{bmatrix}\begin{smallmatrix}M\\O3\end{smallmatrix}^M&\begin{smallmatrix}\\&&13\end{smallmatrix}^D&\begin{smallmatrix}\\&&2007\end{smallmatrix}^Y$						
	City	State Zip Code			Amount of Each Disbursement this Period						
	Washington	DC 20515-									
	Purpose of Disbursement taxes			001	Refund or Disposal of Excess						
	Candidate Name			ategory/ Type	Contributions Required Under 11 C.F.R. 400.53						
	Office Sought: House Disbur	sement For: Primary General	•		TAXES						
	President	Other (specify) ▼									
	State: District:										
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\mathbb{Z}	Mike Pence Committee															
Α.	Full Name (Last, First, Middle Initial)							ion ID		-	1.E1	2521				
A.	Alan Siktberg					Date		Disburs			V .					
	Mailing Address 9235 Bluestone Circle					0 [™] 1	М	/ D	0 -	D /	<u> </u>	ž 0 (0 7 '			
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В.	Full Name (Last, First, Middle Initial) Alan Siktberg					_		ion ID	-	•	1.E1	2522	2			
	Alan Sikiberg					Date	Of L	Disburs / D			Υ	Υ .	YY			
	Mailing Address 9235 Bluestone Circle					0 1			0 8	3		ž 0 (0.7			
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C.	Alan Siktberg					_		Disburs	sen	nent						
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abla	NAME OF COM	MITTEE (In Full)												
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۸.	Alan Siktberg							Date	e of L	isburs	-		Y \	(
	Mailing Address	9235 Bluestone	Circle					0			2 2		2	2007 [°]
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C.	Alan Siktberg	,						Dat	e of D	isburs	seme	ent		
	Mailing Address	9235 Bluestone	Circle					O ^M	2 M	/ D	0 5	J'L	2	2 0 0 7 Y
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	Office Sought:	House	Disburse	ment For:			71 °	CVI	۸DV	,				
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Г	Giaie.	District.	<u> </u>					_			_			
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SCHEDULE B (FEC Form 3) Use seperate schedul							FOR LINE NUMBER:			PAGE 82 / 150					
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	y Information copied from su for commercial purposes, oth														
Ν	NAME OF COMMITTEE (I	n Full)													
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Α.	Full Name (Last, First, Midd Alan Siktberg	dle Initial)						-				7041 ment	1.E1	261	7
		Bluestone	Circle					0 ^M	М		0	D /	Υ	ž 0	0 7 Y
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В.	Full Name (Last, First, Midd Alan Siktberg	die initial)									urse	7041 ment	1.E1	252	27
	Mailing Address 9235	Bluestone	Circle					0	2 ^M	/	^D 1	^D /	Υ	ž 0	0 7 Y
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	State: District	:			<i>,</i> •										
C.	Full Name (Last, First, Midd Alan Siktberg	dle Initial)						-				7041 ment	1.E1	252	18
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	y Information copied from such Reports ar for commercial purposes, other than using				
Λ	NAME OF COMMITTEE (In Full)				
/	Mike Pence Committee				
<u></u>	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12529
A.	Alan Siktberg				Date of Disbursement
	Mailing Address 9235 Bluestone C	Circle			$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 0 & 2 & M \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 6 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
	City Indianapolis	State IN	Zip Code 46236-		Amount of Each Disbursement this Period
	Purpose of Disbursement salary			004	313.25
	Candidate Name			001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	-	Disbursement Fo		71	SALARY
	Senate President	Primary Other (General Specify)		
	State: District:				
В.	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12530
٠.	Alan Siktberg				Date of Disbursement
	Mailing Address 9235 Bluestone C	Circle			$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 0 & 5 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
	City Indianapolis	State IN	Zip Code 46236-		Amount of Each Disbursement this Period
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	salary			001	Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate	Disbursement Fo Primary			SALARY
	President		specify) \blacktriangledown		
	State: District:				
C.	Full Name (Last, First, Middle Initial) Alan Siktberg				Transaction ID: 70411.E12531 Date of Disbursement
	Mailing Address 9235 Bluestone C	Circle			$\begin{bmatrix}\begin{smallmatrix}M\\O3\end{smallmatrix}^M&\begin{smallmatrix}I&D\\12\end{smallmatrix}^I&\begin{smallmatrix}I&D\\1&2\end{smallmatrix}^I&\begin{smallmatrix}Y&Y&Y&Y\\2007\end{smallmatrix}^Y$
	City	State	Zip Code		Amount of Each Disbursement this Period
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	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
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		Det	tailed Summary Page		20a 20b 20c 21					
	y Information copied from such Reports ar for commercial purposes, other than using									
Ν	NAME OF COMMITTEE (In Full)									
17	Mike Pence Committee									
<u></u>	Full Name (Last, First, Middle Initial)				T 1D 70444 E40040					
A.	Alan Siktberg				Transaction ID: 70411.E12618 Date of Disbursement					
	Mailing Address 9235 Bluestone C	Circle			$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$					
	City Indianapolis	State IN	Zip Code 46236-		Amount of Each Disbursement this Period					
	Purpose of Disbursement				39.87					
	travel reimbursement Candidate Name			002	Refund or Disposal of Excess Contributions Required Under					
	Candidate Name			Category/ Type	11 C.F.R. 400.53					
		Disbursement I			TRAVEL REIMBURSEMENT					
	Senate President	Prima Othe	nary General er (specify) ▼							
	State: District:		or (opeony)							
	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12619					
В.	Alan Siktberg				Date of Disbursement					
	Mailing Address 9235 Bluestone C	Circle			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & 4 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & O & O & T \\ Y & Z & O & O & T \end{bmatrix}$					
	City	State			Amount of Each Disbursement this Period					
	Indianapolis	IN	46236-		48.38					
	Purpose of Disbursement travel reimbursement			002	Refund or Disposal of Excess					
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
		Disbursement I			TRAVEL REIMBURSEMENT					
	Senate President	Prima	nary General er (specify)							
	State: District:	Othe	er (specify)							
	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12532					
C.	Alan Siktberg				Date of Disbursement					
	Mailing Address 9235 Bluestone C	Circle			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 9 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$					
	City Indianapolis	State IN	Zip Code 46236-		Amount of Each Disbursement this Period					
	Purpose of Disbursement				313.25					
	salary			001	Refund or Disposal of Excess					
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	•	Disbursement I			SALARY					
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	y Information copied from such Reports and for commercial purposes, other than using the succession of												
\setminus	NAME OF COMMITTEE (In Full)												
	Mike Pence Committee												
Α.	Full Name (Last, First, Middle Initial) Alan Siktberg					Transaction ID: 70411.E12620 Date of Disbursement							
	Mailing Address 9235 Bluestone C	ircle				$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$							
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	Purpose of Disbursement travel reimbursement				002	Refund or Disposal of Excess							
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53							
	Office Sought: House Senate President		ent For: Primary Other (spec	General General		TRAVEL REIMBURSEMENT							
	State: District:												
В.	Full Name (Last, First, Middle Initial) Alan Siktberg					Transaction ID: 70411.E12533 Date of Disbursement							
	Mailing Address 9235 Bluestone C		$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 6 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$										
	City Indianapolis	St IN	ate V	Zip Code 46236-		Amount of Each Disbursement this Period							
	Purpose of Disbursement salary			3: O01 Refund or Disposal of Excess									
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53							
	Office Sought: House Senate President		ent For: Primary Other (spec	General		SALARY							
	State: District:		otrici (spec	Siry) \									
	Full Name (Last, First, Middle Initial)					Transaction ID: 70411.E12471							
C.	The Congressional Club					Date of Disbursement							
	Mailing Address C St. N.W.					$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ O & Z & M \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & Z & D \\ D & Z & I \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & T \end{smallmatrix} \end{bmatrix}$							
	City Washington		ate C	Zip Code 20515-		Amount of Each Disbursement this Period							
	Purpose of Disbursement					300.00							
	event tickets Candidate Name				007 Category/	Refund or Disposal of Excess Contributions Required Under							
					Type	11 C.F.R. 400.53							
	Office Sought: House Senate President		ent For: Primary Other (spec	General		EVENT TICKETS							
	State: District:		, , , ,	+									
s	UBTOTAL of Disbursements This Page (o	otional)			.	629.25							

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NAME OF COMMITTEE (In Full) Mike Pence Committee	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
Full Name (Last, First, Middle Initial) The Muncie Times			Transaction ID: 70411.E12489 Date of Disbursement							
Mailing Address 1394 N. Broadway			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ D & 2 \end{smallmatrix} O \ O \ 7 \end{smallmatrix} $							
City Muncie	State Zip Code IN 47305-		Amount of Each Disbursement this Period							
Purpose of Disbursement advertising Candidate Name		004 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53							
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		ADVERTISING							
Full Name (Last, First, Middle Initial) The Muncie Times			Transaction ID: 70411.E12488 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
Mailing Address 1394 N. Broadway			Amount of Each Disbursement this Period							
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Purpose of Disbursement advertising Candidate Name		004 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53							
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		ADVERTISING							
Full Name (Last, First, Middle Initial) Vectren			Transaction ID: 70411.E12623 Date of Disbursement							
Mailing Address 1630 N. MERIDIAN ST.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & O \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & T \end{smallmatrix} \end{bmatrix}$							
,	State Zip Code IN 46202-		Amount of Each Disbursement this Period							
Purpose of Disbursement utilites		001	98.14 Refund or Disposal of Excess							
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53							
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		UTILITES							
SUBTOTAL of Disbursements This Page (optional)										
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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use seperate schedule(for each category of the Detailed Summary Page		(check only	PAGE 87 / 150 ly one)						
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or	for commercial purposes, other than using the name	e and address of any politic	cal com	nmittee to so	licit contributions from such committee						
\rangle	NAME OF COMMITTEE (In Full) Mike Pence Committee										
۹.	Full Name (Last, First, Middle Initial) Vectren Mailing Address 1630 N. MERIDIAN ST.				Transaction ID: 70411.E12624 Date of Disbursement O 2 M / D 0 9 / Y 2 0 0 7 Y						
		State Zip Code IN 46202-		Amount of Each Disbursement this Period							
	Indianapolis Purpose of Disbursement utilities	IN 46202-	T	001	90.26 Refund or Disposal of Excess						
	Candidate Name		Ca	ategory/ Type	Contributions Required Under 11 C.F.R. 400.53						
	Office Sought: Senate President State: Disburse	ement For: Primary General Other (specify)	al		UTILITIES						
	Full Name (Last, First, Middle Initial)		T ID 70444 E4000E								
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	Mailing Address 1630 N. MERIDIAN ST.				$\begin{bmatrix} 0 & 3 & M \\ 0 & 3 & M \end{bmatrix} / \begin{bmatrix} 0 & 1 & 0 \\ 1 & 4 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 & 7 \\ 0 & 2 & 0 & 0 & 7 \end{bmatrix}$						
	,	State Zip Code IN 46202-		Amount of Each Disbursement this Period							
	Purpose of Disbursement utilities			001	Refund or Disposal of Excess						
	Candidate Name			ategory/ Type	Contributions Required Under 11 C.F.R. 400.53						
	Office Sought: House Disburse Senate President	ement For: Primary Genera Other (specify)	al		UTILITIES						
	State: District:										
Э.	Full Name (Last, First, Middle Initial) Verizon South				Transaction ID: 70411.E12573 Date of Disbursement						
	Mailing Address P.o. Box 920041				$\begin{bmatrix} M & M & M \\ O & 1 & M \end{bmatrix} \ / \ \begin{bmatrix} D & D & D \\ 1 & O \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y \\ 2 & O & O & 7 \end{bmatrix}$						
		State Zip Code TX 75392-004	11		Amount of Each Disbursement this Period						
	Purpose of Disbursement			-	113.21						
	telephone Candidate Name		Ca	001 ategory/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53						
	Senate	ement For: Primary Genera			TELEPHONE						
	State: President State: District:	Other (specify)									
s	UBTOTAL of Disbursements This Page (optional) .			<u></u>	325.90						

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S	CHEDULE B (FEC Form 3)	Use sepe	erate schedule(s)	_	IE NUMBER: PAGE 88 / 150								
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	y Information copied from such Reports a for commercial purposes, other than usin					n for the purpose of solicating contributions solicit contributions from such committee								
Λ	NAME OF COMMITTEE (In Full)													
17	Mike Pence Committee													
<u></u>	Full Name (Last, First, Middle Initial)					T ID 70444 E40E74								
A.	Verizon South					Transaction ID: 70411.E12574 Date of Disbursement								
	Mailing Address P.o. Box 920041					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$								
	City Dallas		State TX	Zip Code 75392-0041		Amount of Each Disbursement this Period								
	Purpose of Disbursement telephone				001	113.59 Refund or Disposal of Excess								
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53								
	Office Sought: House Senate	Disburser	ment For: Primary	General		TELEPHONE								
	President		Other (spe											
	State: District:													
В.	Full Name (Last, First, Middle Initial) Verizon South					Transaction ID: 70411.E12575 Date of Disbursement								
	Mailing Address P.o. Box 920041		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$											
	City Dallas		State TX	Zip Code 75392-0041		Amount of Each Disbursement this Period								
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	telephone				001	Refund or Disposal of Excess								
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53								
	Office Sought: House Senate	Disburser	ment For: Primary	General		TELEPHONE								
	President		Other (spe	cify)										
	State: District:													
C.	Full Name (Last, First, Middle Initial) VISA					Transaction ID: 70411.E12643 Date of Disbursement								
	Mailing Address P.O. Box 77042					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$								
	City Madison		State WI	Zip Code 53707-1042		Amount of Each Disbursement this Period								
	Purpose of Disbursement SEE BELOW				· · ·	6841.78 Refund or Disposal of Excess								
	Candidate Name		l			Contributions Required Under 11 C.F.R. 400.53								
	Office Sought: House	Disburser				SEE BELOW								
	Senate President		Primary Other (spe	General										
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						son for the purpose of solicating contributions o solicit contributions from such committee										
abla	NAME OF COMMITTEE (In Full)															
$ \rangle$	Mike Pence Committee															
Α.	Full Name (Last, First, Middle Initial) Factory Card Outlet					Transaction ID: 70323.E12402 Date of Disbursement O 1										
	Mailing Address 5605 Scatterfie	eld Rd				01 19 2007										
	City Anderson		State IN	Zip Code 46013-		Amount of Each Disbursement this Period										
	Purpose of Disbursement Parade Supplies				004	14.17										
	Candidate Name	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53														
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General ecify) ▼		MEMO: PARADE SUPPLIES										
	State: District:															
В.	Full Name (Last, First, Middle Initial) Lucky Strikes Lanes					Transaction ID: 70323.E12404 Date of Disbursement										
	Mailing Address St Rd. 13 S.	011 7 19 7 2007														
	City Elwood		State IN	Zip Code 46036-		Amount of Each Disbursement this Period										
	Purpose of Disbursement Facility Rental	250.00 Refund or Disposal of Excess														
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53													
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General ecify) ▼		MEMO: FACILITY RENTAL										
	State: District:															
C.	Full Name (Last, First, Middle Initial) Arbys					Transaction ID: 70323.E12436 Date of Disbursement										
	Mailing Address 2820 Broadway	/				011 7 19 7 2007										
	City Anderson		State IN	Zip Code 46011-		Amount of Each Disbursement this Period										
	Purpose of Disbursement Meeting Meals				007	18.91 Refund or Disposal of Excess										
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53										
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General ecify) ▼		MEMO: MEETING MEALS										
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\setminus	NAME OF COMM	ITTEE (In Full)															
/	Mike Pence Cor	nmittee															
Α.	Full Name (Last, F Office Depot	irst, Middle Initial)						Transaction ID: 70323.E12411 Date of Disbursement									
	Mailing Address	3632 Scatterfie	ld Rd.						^м 1	М	/ D	1	9 /	Υ	2 0 0 7 °		
	City Anderson			State IN	Zip Code 46013-			Amount of Each Disbursement this Period									
	Purpose of Disburs Office Supplies	sement				Г	001	155.48 Refund or Disposal of Excess									
	Candidate Name Category/										butio R. ∠	ns 10(Requi				
	Office Sought:	House Senate President	Disburser	ment For: Primary Other (spe	General ecify) ▼			MEMO: OFFICE SUPPLIES									
_		District:															
В.	Full Name (Last, F Hudson News	irst, Middle Initial)									isbur	se	70323 ment	3.E12	2451		
	Mailing Address Washinton Natinal Airport									М	/ D	1	9 /	Υ	2 0 0 7 °		
	City State Zip Code Washington DC 20002-								mou	nt o	f Eac	h I	Disbur	seme	nt this Period		
	Purpose of Disburs Travel Meals	Г	002	Refund or Disposal of Excess					23.69 cess								
	Candidate Name	Candidate Name							11	C.F	F.R. ∠	100	Requi 0.53	red U	nder		
	Office Sought:	House Senate President	Disburser	ment For: Primary Other (spe	General						TEN (RA)		L ME	ALS			
	State:	District:															
C.	Full Name (Last, F Franklin Covey	irst, Middle Initial)											70323 ment	3.E12	2413		
	Mailing Address	6020 East 82nd #950	d Street						^м 1	М	/ D	1	9 /	Υ	2 0 0 7 °		
	City Indianapolis	#000		State IN	Zip Code 46250-			Amount of Each Disbursement this Period							nt this Period		
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	Office Supplies Candidate Name		C	001 ategory/		Co	ontri		ns	posal Requi 0.53							
	Office Sought:	House Senate President	Disburser	ment For: Primary Other (spe	General		Туре		IEM	0 1	TEN	IJ	E SU	PPLI	ES		
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SCHEDULE B (FECFORIII 3)	Use seperate schedule(s)	FOR LINE NUMBER: PAGE 91 / 150					
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only one) X 17 18 19a 19b 20a 20b 20c 21					
Any Information copied from such Reports and State or for commercial purposes, other than using the na		any person for the purpose of solicating contributions mittee to solicit contributions from such committee					
NAME OF COMMITTEE (In Full) Mike Pence Committee	,,						
Full Name (Last, First, Middle Initial) A. Applebees Mailing Address 1922 East 53rd Street		Transaction ID: 70323.E12443 Date of Disbursement M M M / D 1 9 / Y Y Y O 7 Y					
City Anderson	State Zip Code IN 46013-	Amount of Each Disbursement this Period					
Purpose of Disbursement Volunteer Meals Candidate Name Office Sought: House Disbur Senate President	Ca	007 Ategory/ Type Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: VOLUNTEER MEALS					
State: District: Full Name (Last, First, Middle Initial) B. McDonalds		Transaction ID: 70323.E12435 Date of Disbursement					
Mailing Address 111 West 14th Street		0 1 M / D 1 9 / Y 2 0 0 7 Y					
City Anderson Purpose of Disbursement Volunteer Meals Candidate Name	Ca	Amount of Each Disbursement this Period 8.32 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53					
Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼	[MEMO ITEM] MEMO: VOLUNTEER MEALS					
Full Name (Last, First, Middle Initial) C. Speedway		Transaction ID: 70323.E12433 Date of Disbursement					
Mailing Address 3803 S. Scatterfield Rd		$ \begin{array}{c c} & \text{M} & \text{M} \\ \hline 0 & 1 & \text{M} \end{array} $					
City Anderson	State Zip Code IN 46013-	Amount of Each Disbursement this Period 39.90					
Purpose of Disbursement Fuel Candidate Name	002						
Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼	[MEMO ITEM] MEMO: FUEL					
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	EMIZED DISBURSEMENTS		for each	erate schedule(s) category of the Summary Page	(check on										
	y Information copied from such Reports and for commercial purposes, other than using the														
\setminus	NAME OF COMMITTEE (In Full) Mike Pence Committee														
\angle	Full Name (Lost Fixet Middle Initial)					T									
A.	Full Name (Last, First, Middle Initial) Regnery Publishing					Transaction ID: 70323.E12400 Date of Disbursement									
	Mailing Address One Massachusetts	Ave., I	N.W.			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$									
	City Washington	Sta D	ate C	Zip Code 20001-		Amount of Each Disbursement this Period									
	Purpose of Disbursement Fundraising Event Supplies				003	428.22 Refund or Disposal of Excess									
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53									
	Office Sought: House Dis Senate President		ent For: Primary Other (spe	General		[MEMO ITEM] MEMO: FUNDRAISING EVENT SUPPLIES									
	State: District:														
В.	Full Name (Last, First, Middle Initial) Enterprise Rentacar					Transaction ID: 70323.E12450 Date of Disbursement									
	Mailing Address 2213 St. Rd. 109 S.		$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ 0 & 1 & M \end{bmatrix} & \begin{bmatrix} D & D \\ 1 & 9 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{bmatrix}$												
	City Anderson		Amount of Each Disbursement this Period												
	Purpose of Disbursement Car Rental	002	70.38 Refund or Disposal of Excess												
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]												
	Office Sought: House Dis		ent For: Primary Other (spe	General		MEMO: CAR RENTAL									
	State: District:		(-1-	· · · · · · · · · · · · · · · · · · ·											
C.	Full Name (Last, First, Middle Initial) US Airways					Transaction ID: 70323.E12426 Date of Disbursement									
	Mailing Address P.O. Box 2562					$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ 0 & 1 & M \end{bmatrix} & \begin{bmatrix} D & D \\ 1 & 9 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{bmatrix}$									
	City Winston - Salem	Sta N	ate C	Zip Code 27102-		Amount of Each Disbursement this Period									
	Purpose of Disbursement Air Travel				002	203.80 Refund or Disposal of Excess									
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53												
	Office Sought: House Dis Senate President		ent For: Primary Other (spe	General ♥		[MEMO ITEM] MEMO: AIR TRAVEL									
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	y Information copied from such Reports and Sta for commercial purposes, other than using the n															
\setminus	NAME OF COMMITTEE (In Full)															
	Mike Pence Committee															
Α.	Full Name (Last, First, Middle Initial) US Airways				Transaction ID: 70323.E12428 Date of Disbursement											
	Mailing Address P.O. Box 2562				01 19 2007											
	City Winston - Salem	State Zip Code NC 27102-			Amount of Each Disbursement this Period 698.60 Refund or Disposal of Excess											
	Purpose of Disbursement Air Travel			002												
	Candidate Name			itegory/ Γype	11	C.F.I	R. 400		quired U	Inder						
	Office Sought: House Disbuter Senate President State: District:	orsement For: Primary General Other (specify) ▼			MEMC		_	RAV	EL							
В.	Full Name (Last, First, Middle Initial) US Airways				Date of	f Disl	burse	men	323.E12	2427						
	Mailing Address P.O. Box 2562		01	/	1	9	/ Y	^Y 0 0 7 ^Y								
	City Winston - Salem			Amoun	nt of E	Each I	Dist	ourseme	ent this Period							
	Purpose of Disbursement Air Travel Candidate Name			002 itegory/	Coi	ntribu	utions	Rec	al of Exquired U							
	Office Sought: House Disbu	ursement For: Primary General	Гуре	11 C.F.R. 400.53 (IMEMO ITEM) MEMO: AIR TRAVEL												
	President State: District:	Other (specify) ▼														
C.	Full Name (Last, First, Middle Initial) Amoco Oil Co.				Transa Date of				23.E12	2429						
	Mailing Address P.O. Box 4441				0 1	/	^D 1	9	/ Y	2007						
	City Carol Stream	State Zip Code IL 60197-			Amour	nt of E	Each I	Disk	ourseme	ent this Period						
	Purpose of Disbursement Fuel		002 Refund or Disposal of Excess Contributions Required Under													
	Candidate Name	date Name								inder						
	Office Sought: House Disbuter Senate President State: District:	ursement For: Primary General Other (specify) ▼			MEMC		_									
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$\overline{\ \ }$	NAME OF COMMITTEE (In Full Mike Pence Committee)												
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۹.	Full Name (Last, First, Middle Ini Amoco Oil Co.						М	of D	isburs	_			432 0 0 7 [°]	
	Mailing Address P.O. Box	4441					01 19 2007							
	City Carol Stream		State IL	Zip Code 60197-			Amou	ınt o	f Each	n Dis	sburse	emen	t this Period	
	Purpose of Disbursement					_	L.						40.98	
	Fuel Candidate Name				002 Categor	y/	C	ontri	d or D bution: F.R. 40	s R	equire			
	Office Sought: House Senate President State: District:		ement For: Primary Other (spe	General	Туре		[MEM	11 C.F.R. 400.53 MEMO ITEM] MEMO: FUEL						
	Full Name (Last, First, Middle Ini	I tial)					T		ID	- 70	200	T10	400	
3.	Amoco Oil Co.	nai)						of D	isburs	eme				
	Mailing Address P.O. Box		0 1		1	9	l L	2	0 0 7					
	City Carol Stream	State Zip Code ol Stream IL 60197-									burse	emen	t this Period	
	Purpose of Disbursement Fuel	002 Refund or Disposal of Ex												
	Candidate Name				Categor Type	y/	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]							
	Office Sought: House Senate President State: District:		ement For: Primary Other (spe	General cify) ▼			MEM		-					
	Full Name (Last, First, Middle Ini	tial)					_			70		-	444	
Э.	Frischs Anderson	nai)					Date	of D	ion ID:					
	Mailing Address 2121N. Bi	ROADWAY					0 1		1	ı ğ	l L	2	0 0 7	
	City Anderson		State IN	Zip Code 46011-			Amou	ınt o	f Each	n Dis	burse	emen	t this Period	
	Purpose of Disbursement Meeting Meals		007		18.16 Refund or Disposal of Excess						ess			
	Candidate Name				Categor Type	y/		C.F	bution: F.R. 40	0.5		ed Un	der	
	Office Sought: House Senate President		ment For: Primary Other (spe	General cify) ▼			MEM		-		Э МЕ	EALS	3	
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/	Mike Pence Cor	mmittee																
۹.	Full Name (Last, F Bob Evans	irst, Middle Initial)												3.E12	2446			
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	Mailing Address	5555 Scaterfield	d Rd.					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$										
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	Candidate Name					ategory/ Type		11	C.F	R. 4	00			1001				
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	Chahai	President		Other (spe	cify)													
		District:						-				_				_		
3.	Full Name (Last, First, Middle Initial) Bob Evans								Frans Date o		-	-		3.E12	2403			
	Mailing Address 5555 Scaterfield Rd.								о ^м 1	М	/ D	1 9	D /	Y	2007			
	Mailing Address	5555 Scaterfield	d Rd.						U į				3		2007			
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		Senate		Primary	General			"	/ILIVI	ا . ا	VILL :		VG IV		,			
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	Full Name (Last, F											_				_		
Э.	MCL Cafeteria	irst, Mildale Iritial)							Date o	of D	isburs	ser	nent	3.E12	2438			
	Mailing Address	2109 St. Rd. 9							0 ^M 1	М	/ D	1 9	9 /	Y	ž o ŏ 7 ˇ			
	City		5	State	Zip Code			<u> </u>	Amou	nt o	f Fact	— h Г	Disbu	rseme	nt this Period	_		
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	Office Sought:	House	Disburser		Conord			_				-	NG N	1EALS	3			
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	y Information copied from such Reports and Sta for commercial purposes, other than using the r											
\rangle	NAME OF COMMITTEE (In Full) Mike Pence Committee											
Α.	Full Name (Last, First, Middle Initial) MCL Cafeteria			Transaction ID: 70323.E12445 Date of Disbursement 0 1 9 7 9 0 7								
	Mailing Address 2109 St. Rd. 9		0, 10 1200,									
	City Anderson		Amount of Each Disbursement this Period									
	Purpose of Disbursement Meeting Meals	007	25.27 Refund or Disposal of Excess									
	Candidate Name	Category/ Type	Contributions Required Under									
	Senate President	ursement For: Primary General Other (specify) ▼		[MEMO ITEM] MEMO: MEETING MEALS								
	State: District:											
В.	Full Name (Last, First, Middle Initial) Armands Chicago Pizza			Transaction ID: 70323.E12406 Date of Disbursement								
	Mailing Address 4231 WISCONSIN AV		01									
	City Washington	State Zip Code DC 20016-		Amount of Each Disbursement this Period								
	Purpose of Disbursement Meeting Meals		007	68.38 Refund or Disposal of Excess								
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53								
	Senate President	ursement For: Primary General Other (specify) ▼		[MEMO ITEM] MEMO: MEETING MEALS								
	State: District:											
C.	Full Name (Last, First, Middle Initial) Delta Airlines			Transaction ID: 70323.E12424 Date of Disbursement								
	Mailing Address HARTSFIELD, ATLAN	ITA INTL AIRPORT		01 19 / 2007								
	City Atlanta	State Zip Code GA 30320-		Amount of Each Disbursement this Period								
	Purpose of Disbursement Air Travel		002	1098.60 Refund or Disposal of Excess								
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53								
	Office Sought: House Disbution Senate President	ursement For: Primary General Other (specify)		[MEMO ITEM] MEMO: AIR TRAVEL								
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5	CHEDULE B	(FEC Form 3	5)	Use seperate schedule(s)				ENUMBER: PAGE 97 / 150			/ 150		
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\rangle	Mike Pence Co	mmittee											
Α.	Full Name (Last, First, Middle Initial) Www.earthlink.net						Transaction ID: 70323.E12415 Date of Disbursement						
	Mailing Address	1375 Peachtree Level A	St.					0 ^M 1	M / D	19	/ Y	ž o č	7 Y
	City Atlanta			State GA	Zip Code 30309-			Amou	nt of Eac	h Dis	bursen		•
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	Candidate Name					Categ Typ		11	ontributio C.F.R.	100.5		Under	
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В.	Full Name (Last, F Evas Pancake	•						Date o	action II of Disbur	seme			
	Mailing Address	831 Broadway						0 ^M 1	M / D	1 9	/ Y	žoč	7
	City Anderson			State IN	Zip Code 46012-			Amou	nt of Eac	h Dis	bursen	nent this	Period
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	Candidate Name					Categ Typ		11	Ontribution C.F.R.	100.5		Under	
	Office Sought:	House Senate President	Disburse	ment For: Primary Other (spe	General ▼				O ITEN D: MEE		S MEA	LS	
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C.	Full Name (Last, F Bruners Family								action II of Disbur			12410	
	Mailing Address	2200 W Kilgore	Ave.					0 ^M 1	M / D	1 9	/ Y	žoč	7
	City Muncie			State IN	Zip Code 47304-			Amou	nt of Eac	h Dis	bursen	nent this	Period
	Purpose of Disbursement Meeting Meals 007					7	Re	efund or	Dispo	sal of E	-	0.00	
	Candidate Name					Categ Typ		11	Ontribution C.F.R.	100.5		Under	
	Office Sought:	House Senate President	Disburse	ment For: Primary Other (spe	General ecify) ▼			-	O ITEN D: MEE	-	G MEA	LS	
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	EMIZED DISBURSEMENTS	Detailed	category of the Summary Page		X 17 18 19a 19b 20a 20b 20c 21		
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam						
\setminus	NAME OF COMMITTEE (In Full)						
/	Mike Pence Committee						
Α.	Full Name (Last, First, Middle Initial) Toles Flowers Mailing Address 627 Nichol Ave.				Transaction ID: 70323.E12408 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
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	Purpose of Disbursement				204.05		
	Flowers Candidate Name			007 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Senate President	ement For: Primary Other (spe	General ecify) ▼		MEMO: FLOWERS		
_	State: District: Full Name (Last, First, Middle Initial)						
В.					Transaction ID: 70323.E12441 Date of Disbursement		
	Mailing Address Longworth H.O.B.				01 19 7 2007		
	City Washington	State DC	Zip Code 20515-		Amount of Each Disbursement this Period		
	Purpose of Disbursement Fundraising Event Supplies			003	250.00 Refund or Disposal of Excess		
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]		
	Office Sought: House Disburse Senate President	Primary	General		MEMO: FUNDRAISING EVENT SUPPLIES		
	State: District:	Other (spe	ecity) 🔻				
С.	Full Name (Last, First, Middle Initial) Anderson Herald - Bulletin				Transaction ID: 70323.E12420 Date of Disbursement		
	Mailing Address 1133 Jackson St.				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 9 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$		
	City Anderson	State IN	Zip Code 46016-		Amount of Each Disbursement this Period		
	Purpose of Disbursement Subscription			004	14.00		
	Candidate Name			001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disburse Senate President	ement For: Primary Other (see	General		[MEMO: SUBSCRIPTION		
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	y Information copied from such Reports and State for commercial purposes, other than using the nar										
\setminus	NAME OF COMMITTEE (In Full)										
\rangle	Mike Pence Committee										
Α.	Full Name (Last, First, Middle Initial) Holiday Inn							sburse	emen	323.E12	2434
	Mailing Address 3 Ravina Dr. Sutie 2000					0 ^M 1	М	1	9	/ Y	2 0 0 7 °
	City Atlanta	State GA	Zip Code 30346-1249			Amou	nt o	f Each	Disb	ourseme	nt this Period
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	Candidate Name				tegory/ Гуре		C.F	R. 40	0.53	quired U	nder
	Senate President	Primary Other (spe	General ecify) ▼			MEMO		-		i	
	State: District:										
В.	Full Name (Last, First, Middle Initial) Wall Street Journal					Date	of Di	sburse	emen		
	Mailing Address 84 Second Ave.					0 ^M 1	M	1	9	/ Y	ž 0 0 7 [×]
	City Chicopee	State MA	Zip Code 01020-			Amou	nt o	f Each	Disb	ourseme	nt this Period
	Purpose of Disbursement Subscription				001					al of Exe	
	Candidate Name				tegory/ Гуре	11 [MEM	C.F	R. 40	0.53	quired O	nder
	Senate President	Primary Other (spe	General ▼			_		-		PTION	
	State: District:										
C.	Full Name (Last, First, Middle Initial) Burger King					Date	of Di	sburse	emen		
	Mailing Address 810 E. McGalliard Rd.					0 ^M 1	М	1	9	′	2 0 0 7 °
	City Muncie	State IN	Zip Code 47304-			Amou	nt o	f Each	Disb	ourseme	nt this Period
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	Candidate Name				tegory/ Гуре		C.F	R. 40	0.53	quired U	nder
	Senate President	Primary Other (spe	General ▼			_		-		MEALS	
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Ш	EMIZED DISBURSEMENTS	5 10		Summary Page	,	X 17 18 19a 19b 20b 20c 21
	y Information copied from such Reports and for commercial purposes, other than using					for the purpose of solicating contributions
	NAME OF COMMITTEE (In Full)			7		
\rangle	Mike Pence Committee					
Α.	Full Name (Last, First, Middle Initial) HSN					Transaction ID: 70323.E12418 Date of Disbursement
	Mailing Address 1 HSN Drive					0 1 M / D 1 9 / Y 2 0 0 7 Y
	City Saint Petersburg	Stat FL		Zip Code 33729-		Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping				001	108.81 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under
	Office Sought: House Senate President		nt For: imary her (spe	General cify) ▼		MEMO: SHIPPING
	State: District:					
В.	Full Name (Last, First, Middle Initial) HSN					Transaction ID: 70323.E12414 Date of Disbursement
	Mailing Address 1 HSN Drive					$ \begin{bmatrix} M & M & / & D & D & D & Y & Y & Y & Y & Y & Y & Y$
	City Saint Petersburg	Stat FL		Zip Code 33729-		Amount of Each Disbursement this Period
	Purpose of Disbursement Office Supplies				001	158.89 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Office Sought: House Senate President		nt For: imary her (spe	General		MEMO: OFFICE SUPPLIES
	State: District:					
C.	Full Name (Last, First, Middle Initial) HSN					Transaction ID: 70323.E12399 Date of Disbursement
	Mailing Address 1 HSN Drive					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Saint Petersburg	Stat FL		Zip Code 33729-		Amount of Each Disbursement this Period
	Purpose of Disbursement Office Supplies				001	237.60 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President		nt For: imary her (spe	General cify) ▼		MEMO: OFFICE SUPPLIES
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SCHEDULE B (FECForm 3)	Use seperate schedule(s)	-	NUMBER: PAGE 101 / 150
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21
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NAME OF COMMITTEE (In Full) Mike Pence Committee			
Full Name (Last, First, Middle Initial) A. Northwest Airlines Mailing Address 1721 K St. NW			Transaction ID: 70323.E12425 Date of Disbursement 0 1
City Washington	State Zip Code DC 20006-		Amount of Each Disbursement this Period
Purpose of Disbursement Air Travel Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disbu Senate President State: District:	rsement For: Primary General Other (specify)		[MEMO ITEM] MEMO: AIR TRAVEL
Full Name (Last, First, Middle Initial) B. USPS			Transaction ID: 70323.E12417 Date of Disbursement
Mailing Address 1505 Raible Rd			$\begin{bmatrix} \begin{smallmatrix} M & 1 & M \\ 0 & 1 & M \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 9 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
City Anderson	State Zip Code IN 46011-		Amount of Each Disbursement this Period
Purpose of Disbursement Postage Candidate Name		001 Category/	Refund or Disposal of Excess Contributions Required Under
Office Sought: House Disbu Senate President State: District:	rsement For: Primary General Other (specify)	Туре	11 C.F.R. 400.53 [MEMO ITEM] MEMO: POSTAGE
Full Name (Last, First, Middle Initial) C. Perkins			Transaction ID: 70323.E12440 Date of Disbursement
Mailing Address 5260 S. Scatterfield Ro	d.		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & I \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} M & I & D \\ I & I \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ I & I & I \end{smallmatrix} \end{bmatrix} \ \ Y = \begin{bmatrix} Y & Y & Y & Y \\ I & I & I & I \end{bmatrix} \ \ Y = \begin{bmatrix} Y & Y & Y & Y \\ I & I & I & I \end{bmatrix} \ \ Y = \begin{bmatrix} Y & Y & Y & Y \\ I & I & I & I \end{bmatrix} \ \ Y = \begin{bmatrix} Y & Y & Y & Y \\ I & I & I & I \end{bmatrix} \ \ Y = \begin{bmatrix} Y & Y & Y & Y \\ I & I & I & I \end{bmatrix} \ \ Y = \begin{bmatrix} Y & Y & Y & Y \\ I & I & I & I \end{bmatrix} \ \ Y = \begin{bmatrix} Y & Y & Y & Y \\ I & I & I & I \end{bmatrix} \ \ Y = \begin{bmatrix} Y & Y & Y & Y \\ I & I & I \end{bmatrix} \ \ Y = \begin{bmatrix} Y & Y & Y & Y \\ I & I & I \end{bmatrix} \ \ Y = \begin{bmatrix} Y & Y & Y & Y \\ I & I & I \end{bmatrix} \ \ Y = \begin{bmatrix} Y & Y & Y & Y \\ I & I & I \end{bmatrix} \ \ Y = \begin{bmatrix} Y & Y & Y \\ I & Y \end{bmatrix} \ \ Y = \begin{bmatrix} Y & Y & Y \\ I & Y \end{bmatrix} \ \ Y = \begin{bmatrix} Y & Y & Y \\ I & Y \end{bmatrix} \ \ Y = \begin{bmatrix} Y & Y & Y \\ I & Y \end{bmatrix} \ \ \ Y = \begin{bmatrix} Y & Y & Y \\ I & Y \end{bmatrix} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $
City Anderson	State Zip Code IN 46013-		Amount of Each Disbursement this Period
Purpose of Disbursement Meeting Meals		007	17.44 Refund or Disposal of Excess
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
Office Sought: Senate President State: Disbu	rsement For: Primary General Other (specify)		[MEMO ITEM] MEMO: MEETING MEALS
	51)		0.00
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SCHEDULE B (FEC Form 3)				l F	ORLINE	E NUMBER: PAGE 102/150		
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_		Detailed Summary Page				X 17 18 19a 19b 20a 20b 20c 21		
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Ν	NAME OF COMMITTEE (In Full)							
V	Mike Pence Committee							
Α.	Full Name (Last, First, Middle Initial) The Star Press					Transaction ID: 70323.E12419 Date of Disbursement		
	Mailing Address PO BOX 2408					$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ O & I & M \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ I & O \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ I & O & O \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ I & O & O \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ I & I & I \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ I & I & I \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ I & I & I \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ I & I & I \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ I & I & I \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ I & I \end{bmatrix} & \begin{bmatrix} Y & Y \\ I & I \end{bmatrix} & \begin{bmatrix} Y & Y \\ I & I \end{bmatrix} & \begin{bmatrix} Y & Y \\ I & I \end{bmatrix} & \begin{bmatrix} Y & Y \\ I & I \end{bmatrix} & \begin{bmatrix} Y & Y \\ I & I \end{bmatrix} & \begin{bmatrix} Y & Y \\ I & I \end{bmatrix} & \begin{bmatrix} Y & Y \\ I & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \end{bmatrix} & \mathbf{Y} \end{bmatrix} & \mathbf{Y} \end{bmatrix} & \mathbf{Y} \end{bmatrix} & \mathbf{Y} \end{bmatrix} & \mathbf{Y} \end{bmatrix} & \mathbf{Y} \end{bmatrix} & \mathbf{Y} \end{bmatrix} & \mathbf{Y} \end{bmatrix} & \mathbf{Y} \end{bmatrix} & \mathbf{Y} \end{bmatrix} & \mathbf{Y} \end{bmatrix}$		
	City Muncie	State IN	Zip Code 47307-			Amount of Each Disbursement this Period		
	Purpose of Disbursement	IIN	47307-			14.10		
	Subscription			00	01	Refund or Disposal of Excess		
	Candidate Name				egory/	Contributions Required Under 11 C.F.R. 400.53		
	Office Courbby House Dishure			Ту	/pe	[MEMO ITEM]		
	Office Sought: House Disburse Senate	ement For: Primary	General			MEMO: SUBSCRIPTION		
	President	Other (spe						
	State: District:							
В.	Full Name (Last, First, Middle Initial)					Transaction ID: 70323.E12409		
υ.	Ruby Tuesday					Date of Disbursement		
	Mailing Address 5530 S. Scatterfield					$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ O & 1 & M \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 1 & 9 \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{bmatrix}$		
	City Anderson	State IN	Zip Code 46013-			Amount of Each Disbursement this Period		
	Purpose of Disbursement Meeting Meals 007				07	58.35 Refund or Disposal of Excess		
	Candidate Name Category					Contributions Required Under		
				Ту	/pe	11 C.F.R. 400.53 [MEMO ITEM]		
	Office Sought: House Disburse Senate	ement For: Primary	General			MEMO: MEETING MEALS		
	President	Other (spe						
	State: District:] (-	·					
_	Full Name (Last, First, Middle Initial)					Transaction ID: 70323.E12437		
C.	Ponderosa					Date of Disbursement		
	Mailing Address 20006 St. Rd. 109					$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 9 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$		
	City	State	Zip Code			Amount of Each Disbursement this Period		
	Anderson	IN	46016-			00.00		
	Purpose of Disbursement				0.7	28.89		
	Meeting Meals Candidate Name				egory/	Refund or Disposal of Excess Contributions Required Under		
					/pe	11 C.F.R. 400.53		
	· H	ement For:				[MEMO ITEM] MEMO: MEETING MEALS		
	Senate President	Primary	General					
	State: District:	Other (spe	ony) ♥					
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S	CHEDULE B (FEC Form 3)	Use seperate schedule(s)		NUMBER: PAGE 103 / 150				
ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page	(check only	X 17 18 19a 19b 20a 20b 20c 21				
	y Information copied from such Reports and Statem for commercial purposes, other than using the name							
\rangle	NAME OF COMMITTEE (In Full) Mike Pence Committee							
_								
۹.	Full Name (Last, First, Middle Initial) Texas Road House		Transaction ID: 70323.E12449 Date of Disbursement					
	Mailing Address 2115 N. Scatterfield Rd.			01 19 2007				
	City Anderson	State Zip Code IN 46013-		Amount of Each Disbursement this Period				
	Purpose of Disbursement Travel Meals		002	50.00 Refund or Disposal of Excess				
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		[MEMO ITEM] MEMO: TRAVEL MEALS				
	State: District:							
3.	Full Name (Last, First, Middle Initial) New York Times			Transaction ID: 70323.E12421 Date of Disbursement				
	Mailing Address 229 W. 43RD ST.	$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & I \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & I \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & O & T \end{smallmatrix} \end{bmatrix}$						
		State Zip Code NY 10036-		Amount of Each Disbursement this Period				
	Purpose of Disbursement Subscription	25.20 Refund or Disposal of Excess						
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]					
	Senate President	ement For: Primary General Other (specify)		MEMO: SUBSCRIPTION				
	State: District:							
Э.	Full Name (Last, First, Middle Initial) Walden Books			Transaction ID: 70323.E12412 Date of Disbursement				
	Mailing Address 2109 S. SCATTERFIELD		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & I \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & D \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & T \end{smallmatrix} \end{bmatrix}$					
	City Anderson	State Zip Code IN 46016-		Amount of Each Disbursement this Period				
	Purpose of Disbursement Office Supplies	81.31 Refund or Disposal of Excess						
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		[MEMO ITEM] MEMO: OFFICE SUPPLIES				
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	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21		
	Information copied from such Reports and Statem or commercial purposes, other than using the name					
<u> </u>	NAME OF COMMITTEE (In Full)					
${}$	Mike Pence Committee					
۹.	Full Name (Last, First, Middle Initial) Verizon Wireless			Transaction ID: 70323.E12416 Date of Disbursement		
	Mailing Address P.O. Box 630024			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		
		State Zip Code TX 75263-0024		Amount of Each Disbursement this Period		
	Purpose of Disbursement		004	105.97		
	Telephone Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		[MEMO ITEM] MEMO: TELEPHONE		
	Full Name (Last, First, Middle Initial)			Transaction ID: 70411.E12640		
	VISA			Date of Disbursement		
	Mailing Address P.O. Box 77042			01 7 19 7 2007		
	,	State Zip Code WI 53707-1042		Amount of Each Disbursement this Period		
	Purpose of Disbursement SEE BELOW			5223.56 Refund or Disposal of Excess		
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify) ▼		SEE BELOW		
) .	Full Name (Last, First, Middle Initial) US Airways			Transaction ID: 70323.E12363 Date of Disbursement		
	Mailing Address P.O. Box 2562			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ D & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & O & O \\ Y & 2 & O & O & 7 \end{bmatrix}$		
		State Zip Code NC 27102-		Amount of Each Disbursement this Period		
	Purpose of Disbursement Air Travel		002	384.30 Refund or Disposal of Excess		
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]		
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify) ▼		MEMO: AIR TRAVEL		
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name			
\rangle	NAME OF COMMITTEE (In Full) Mike Pence Committee			
Α.	Full Name (Last, First, Middle Initial) US Airways			Transaction ID: 70323.E12364 Date of Disbursement
	Mailing Address P.O. Box 2562			01 19 7 2007
		State Zip Code NC 27102-		Amount of Each Disbursement this Period
	Purpose of Disbursement Air Travel	002	Refund or Disposal of Excess	
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Office Sought: House Disburse Senate President State: District:	Primary General Other (specify)		MEMO: AIR TRAVEL
В.	Full Name (Last, First, Middle Initial) US Airways			Transaction ID: 70323.E12361 Date of Disbursement
	Mailing Address P.O. Box 2562			$ \begin{bmatrix} M & M \\ 0 & 1 \end{bmatrix} \begin{bmatrix} M & 1 & 9 \\ 0 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{bmatrix} $
	•	State Zip Code NC 27102-		Amount of Each Disbursement this Period
	Purpose of Disbursement Air Travel Candidate Name		002 Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	Туре	[MEMO ITEM] MEMO: AIR TRAVEL
C.	Full Name (Last, First, Middle Initial) US Airways			Transaction ID: 70323.E12362 Date of Disbursement
	Mailing Address P.O. Box 2562			01 19 7 2007
		State Zip Code NC 27102-		Amount of Each Disbursement this Period
	Purpose of Disbursement Air Travel	002	384.30 Refund or Disposal of Excess	
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		MEMO: AIR TRAVEL
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SCHEDULE B (FEC Form 3)			NUMBER: PAGE 106 / 150		
TEMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the	(check only	y one)		
	Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21		
Any Information copied from such Reports and State	ments may not be sold or used	by any person f			
or for commercial purposes, other than using the nar					
NAME OF COMMITTEE (In Full)					
/ Mike Pence Committee					
Full Name (Last, First, Middle Initial) US Airways			Transaction ID: 70323.E12371 Date of Disbursement		
Mailing Address P.O. Box 2562			01 1 9 7 2 0 0 7		
City Winston - Salem	State Zip Code NC 27102-		Amount of Each Disbursement this Period		
Purpose of Disbursement Air Travel		002	384.30 Refund or Disposal of Excess		
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
Office Sought: House Disburs Senate President State: District:	sement For: Primary General Other (specify)	Туре	[MEMO ITEM] MEMO: AIR TRAVEL		
Full Name (Last, First, Middle Initial) 3. US Airways			Transaction ID: 70323.E12368 Date of Disbursement		
Mailing Address P.O. Box 2562			$\begin{bmatrix}\begin{smallmatrix}M\\0\end{smallmatrix}1^M\\\end{smallmatrix} \begin{bmatrix}\begin{smallmatrix}M\\1\end{smallmatrix}9\\\end{smallmatrix} \begin{bmatrix}\begin{smallmatrix}Y\\2\end{smallmatrix}0\overset{Y}0\overset{Y}7\\\end{smallmatrix}$		
City Winston - Salem	State Zip Code NC 27102-		Amount of Each Disbursement this Period		
Purpose of Disbursement Air Travel		002	Refund or Disposal of Excess		
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]		
Office Sought: House Disburs Senate President State: District:	sement For: Primary General Other (specify) ▼		MEMO: AIR TRAVEL		
Full Name (Last, First, Middle Initial) US Airways			Transaction ID: 70323.E12365 Date of Disbursement		
Mailing Address P.O. Box 2562			$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} \begin{smallmatrix} M \\ I \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ I \end{smallmatrix} \begin{bmatrix} M \\ I \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ I \end{smallmatrix} \begin{bmatrix} M \\ M \end{smallmatrix} \begin{bmatrix} M \\ I \end{smallmatrix} \begin{bmatrix} M \\ M \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ M \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ M \end{smallmatrix} \begin{bmatrix} M \\ M \end{smallmatrix} \begin{bmatrix} M \\ M \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ M \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ M \end{smallmatrix} \begin{bmatrix} M \\ M \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ M \end{smallmatrix} \begin{bmatrix} M \\ M \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ M \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ M \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ M \end{smallmatrix} \begin{bmatrix} M \\ M \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ M \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ M \end{smallmatrix} \begin{bmatrix} M \\ M \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ M \end{smallmatrix} \begin{bmatrix} M \\ M \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ M$		
City Winston - Salem	State Zip Code NC 27102-		Amount of Each Disbursement this Period		
Purpose of Disbursement Air Travel	Purpose of Disbursement				
Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]		
Office Sought: House Senate President State: District:	sement For: Primary General Other (specify) ▼		MEMO: AIR TRAVEL		
SUBTOTAL of Disbursements This Page (optional)	>	0.00		
TOTAL This Period (last page this line number only					

SCHEDULE B (FEC Form 3)			1	FOR LINE N	NUMBER: PAGE 107 / 150			
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Λ	NAME OF COMMITTEE (In Full)							
\mathbb{Z}	Mike Pence Committee							
Α.	Full Name (Last, First, Middle Initial) US Airways				Transaction ID: 70323.E12367			
	US All ways				Date of Disbursement			
	Mailing Address P.O. Box 2562				0 1 M / D 1 9 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City Winston - Salem	State Zip Code NC 27102-			Amount of Each Disbursement this Period			
	Purpose of Disbursement	110 27102			384.30			
	Air Travel			002	Refund or Disposal of Excess			
	Candidate Name			ategory/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Disbu	rsement For:			[MEMO ITEM]			
	Senate	Primary General			MEMO: AIR TRAVEL			
	President	Other (specify)						
_	State: District: Full Name (Last, First, Middle Initial)							
В.					Transaction ID: 70323.E12360 Date of Disbursement			
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	Mailing Address P.O. Box 2562				01 19 2007			
	City Winston - Salem	State Zip Code NC 27102-			Amount of Each Disbursement this Period			
	Purpose of Disbursement				537.20			
	Air Travel Candidate Name Cat				Refund or Disposal of Excess Contributions Required Under			
					11 C.F.R. 400.53			
	Office Sought: House Disbu	rsement For:			[MEMO ITEM] MEMO: AIR TRAVEL			
	Senate	Primary General			WEWO. AIR TRAVEL			
	State: President State: District:	Other (specify)						
	Full Name (Last, First, Middle Initial)				Transaction ID: 70323.E12366			
C.	US Airways				Date of Disbursement			
	Mailing Address P.O. Box 2562				$\begin{bmatrix}\begin{smallmatrix}M&M&M\\O&1\end{smallmatrix}\end{bmatrix}^{M} \begin{bmatrix}\begin{smallmatrix}D&D\\I&9\end{smallmatrix}\end{bmatrix}^{M} \begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y\\2&0&0&7\end{smallmatrix}\end{bmatrix}^{Y}$			
	C:h.	State Zip Code			Amount of Each Disbursement this Period			
	City Winston - Salem	NC 27102-			Amount of Each Disbursement this Period			
	Purpose of Disbursement			• •	384.30			
	Air Travel Candidate Name				Refund or Disposal of Excess Contributions Required Under			
	Candidate Name			ategory/ Type	11 C.F.R. 400.53			
	Office Sought: Disbursement For:				[MEMO ITEM] MEMO: AIR TRAVEL			
	Senate President	Primary General Other (specify) ▼						
	State: District:	→ Strict (opeony) ▼						
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	CHEDULE B (FEC Form 3)	Use seperate	schedule(s)	-	E NUMBER: PAGE 108 / 150		
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\rangle	NAME OF COMMITTEE (In Full) Mike Pence Committee						
Α.	Full Name (Last, First, Middle Initial) US Airways Mailing Address P.O. Box 2562				Transaction ID: 70323.E12369 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City Winston - Salem		o Code 7102-		Amount of Each Disbursement this Period		
	Purpose of Disbursement Air Travel Candidate Name				Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]		
	Senate President State: District:	ement For: Primary Other (specify)	General ▼		MEMO: AIR TRAVEL		
В.	Full Name (Last, First, Middle Initial) US Airways Mailing Address P.O. Box 2562				Transaction ID: 70323.E12370 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City Winston - Salem		o Code 7102-		Amount of Each Disbursement this Period		
	Purpose of Disbursement Air Travel Candidate Name		C	002 Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (specify)	General	Турс	[MEMO ITEM] MEMO: AIR TRAVEL		
С.	Full Name (Last, First, Middle Initial) Hunan Dynasty				Transaction ID: 70323.E12356 Date of Disbursement		
	Mailing Address 203 Pennslyvania South	East			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & O \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & O & Y \\ I & O & O & T \end{smallmatrix} \end{bmatrix}$		
	Washington		Code 0003-		Amount of Each Disbursement this Period		
	Purpose of Disbursement Meeting Meals	007	Refund or Disposal of Excess				
	Candidate Name		C	Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]		
	Office Sought: House Disburse Senate President	ement For: Primary Other (specify)	General ▼		MEMO: MEETING MEALS		
_	State: District:						
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S	CHEDULE B (FEC Form 3)	Use seperate schedule(s)		NUMBER: PAGE 109 / 150
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$\overline{\ }$	NAME OF COMMITTEE (In Full)			
	Mike Pence Committee			
۹.	Full Name (Last, First, Middle Initial) US House of Rep. Gift Shop			Transaction ID: 70323.E12357 Date of Disbursement
	Mailing Address Longworth H.O.B.			$ \begin{bmatrix} M & M & M \\ 0 & 1 & M \end{bmatrix} \begin{bmatrix} D & D & M \\ 1 & 9 & M \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{bmatrix} $
	City Washington	State Zip Code DC 20515-		Amount of Each Disbursement this Period
	Purpose of Disbursement Promotional Materials		003	454.50 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate President	sement For: Primary General Other (specify) ▼		[MEMO ITEM] MEMO: PROMOTIONAL MATERIA- LS
	State: District:			
3.	Full Name (Last, First, Middle Initial) VISA			Transaction ID: 70323.E12355 Date of Disbursement
	Mailing Address P.O. Box 77042			$ \begin{bmatrix} M & M & M \\ 0 & 1 & M \end{bmatrix} \begin{bmatrix} D & 1 & 9 \\ 1 & 9 & M \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{bmatrix} $
	City Madison	State Zip Code WI 53707-1042		Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fee		001	35.00 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President State: District:	sement For: Primary General Other (specify) ▼		[MEMO: BANK FEE
	Full Name (Last, First, Middle Initial)			Transaction ID: 70411.E12642
Э.	VISA			Date of Disbursement
	Mailing Address P.O. Box 77042			01 19 7 2007
	City Madison	State Zip Code WI 53707-1042		Amount of Each Disbursement this Period
	Purpose of Disbursement SEE BELOW			1043.98 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate	ement For: Primary General		SEE BELOW
	State: President District:	Other (specify) ▼		
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A. Arbys Malling Address 2820 Broadway City State Zip Code IN 48011- Purpose of Disbursement Volunteer Meals Candidate Name Office Sought: House Senate President Disbursement For: State: District: Full Name (Last, First, Middle Initial) Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Transaction ID: 70323.E12391 Date of Disbursement this Period Amount of Each Disbursement Initial Memo: VoluntEER MEALS Transaction ID: 70323.E12391 Date of Disbursement Initial Period Amount of Each Disbursement Initial Period Transaction ID: 70323.E12391 Date of Disbursement Initial Period Transaction ID: 70323.E12391 Date of Disbursement Initial Period Transaction ID: 70323.E12391 Date of Disbursement Initial Period Transaction ID: 70323.E12391 Date of Disbursement Initial Period Transaction ID: 70323.E12391 Date of Disbursement Initial Period Transaction ID: 70323.E12391 Date of Disbursement Initial Period Transaction ID: 70323.E12390 Date of Disbursement Initial Period Transaction ID: 70323.E12390 Date of Disbursement Initial Period Transaction ID: 70323.E12390 Date of Disbursement Initial Period Transaction ID: 70323.E12390 Date of Disbursement Initial Period Transaction ID: 70323.E12390 Date of Disbursement Initial Period Transaction ID: 70323.E12390 Date of Disbursement Initial Period Transaction ID: 70323.E12390 Date of Disbursement Initial Period Transaction ID: 70323.E12390 Date of Disbursement Initial Period Transaction ID: 70323.E12390 Date of Disbursement Initial Period Transaction ID: 70323.E12390 Date of Disbursement Initial Period Transaction ID: 70323.E12390 Date of Disbursement Initial Period Transaction ID: 70323.E12390 Date of Disb	/	Mike Pence Committee							
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State: District: Full Name (Last, First, Middle Initial) B. Office Depot Mailing Address 3632 Scatterfield Rd. City Anderson IN 46013- Purpose of Disbursement Office Supplies Candidate Name District: Full Name (Last, First, Middle Initial) Office Sought: House Primary General Disbursement District: Full Name (Last, First, Middle Initial) Ct. Regnery Publishing Mailing Address One Massachusetts Ave., N.W. City State Zip Code DC 20001- Purpose of Disbursement For: State Zip Code DC 20001- Purpose of Disbursement For: State Zip Code DC 20001- Purpose of Disbursement To: State Zip Code DC 20001- Purpose of Disbursement State Zip Code DC 20001- Purpose of Di		· H							
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\setminus	NAME OF COMMITTEE (In Full)													
/	Mike Pence Committee													
Α.	Full Name (Last, First, Middle Initia Enterprise Rentacar								Transaction ID: 70323.E12398 Date of Disbursement					
	Mailing Address 2213 St. Ro	l. 109 S.					$\begin{bmatrix} 0 & 1 & M \\ 0 & 1 & M \end{bmatrix} / \begin{bmatrix} 0 & 1 & 0 \\ 1 & 9 \end{bmatrix} / \begin{bmatrix} y & y & y & y \\ 2 & 0 & 0 & 7 \end{bmatrix}$							
	City Anderson		State IN	Zip Code 46016-			Amount of Each Disbursement this Period							
	Purpose of Disbursement Car Rental					002		Refund or Disposal of Excess						
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	Office Sought: House Senate President	Disburse	ement For: Primary Other (spe	General ▼			-	[MEMO ITEM] MEMO: CAR RENTAL						
	State: District:			·										
В.	Full Name (Last, First, Middle Initia Amoco Oil Co.	al)							ion ID:	emen	_	E12	396	
	Mailing Address P.O. Box 44	141					0 ^M 1	М	/ D 1	9	/ Y	ž	0 0 7	
	City State Zip Code Carol Stream IL 60197-						Amo	unt c	of Each	n Disb	urse	men	t this Period	
	Purpose of Disbursement Fuel	Γ	002	<u> </u>	Refur	nd or D	ispos	al of	Exc	31.10 ess				
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C.	Full Name (Last, First, Middle Initia Amoco Oil Co.	al)					Date	of D	ion ID: isburs	emen	_			
	Mailing Address P.O. Box 44	141				01 19						0 0 7		
	City Carol Stream		State IL	Zip Code 60197-			Amo	unt c	of Each	n Disb	urse	men	t this Period	
	Purpose of Disbursement Fuel					002			nd or D					
	Candidate Name					ategory/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]							
	Office Sought: House Senate President State: District:	Senate Primary General President Other (specify) ▼							FUEL					
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1 \	NAME OF COMMITTEE (In Full) Mike Pence Committee				
A. (Full Name (Last, First, Middle Initial) USPS Mailing Address 1505 Raible Rd				Transaction ID: 70323.E12393 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
1	City Anderson	State IN	Zip Code 46011-		Amount of Each Disbursement this Period 483.60
1	Purpose of Disbursement Postage Candidate Name	003 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: Senate President State: District:	Disbursement For: Primary Other (sp	General ecify) ▼	71-1	[MEMO ITEM] MEMO: POSTAGE
B. (Full Name (Last, First, Middle Initial) USPS				Transaction ID: 70323.E12394 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_	Mailing Address 1505 Raible Rd City		0 1 1 9 2 0 0 7 Amount of Each Disbursement this Period		
1	Anderson Purpose of Disbursement	State IN		39.00	
1	Postage Candidate Name			001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Office Sought: House Senate President	Disbursement For: Primary Other (sp	General ecify) ▼		MEMO: POSTAGE
	State: District: Full Name (Last, First, Middle Initial)				Transaction ID: 70323.E12389
C. \	VISA				Date of Disbursement
I	Mailing Address P.O. Box 77042				$\begin{bmatrix} \begin{smallmatrix} M & 1 & M \\ 0 & 1 & M \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 9 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
	City Madison	State WI	Zip Code 53707-1042		Amount of Each Disbursement this Period
[Purpose of Disbursement Bank Fee Candidate Name			001 Category/	Refund or Disposal of Excess Contributions Required Under
Ō	Office Sought: House Senate President	Disbursement For: Primary Other (sp	General	Туре	11 C.F.R. 400.53 [MEMO ITEM] MEMO: BANK FEE
;	State: District:	Otiloi (3p			

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\rangle	NAME OF COMMITTEE (In Full) Mike Pence Committee				
Α.	Full Name (Last, First, Middle Initial) Verizon Wireless				Transaction ID: 70323.E12392 Date of Disbursement
	Mailing Address P.O. Box 630024				01 19 7 2007
	City Dallas	State TX	Zip Code 75263-0024		Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone			001	10.00 Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburs Senate President	ement For: Primary Other (spe	General ecify) ▼		[MEMO: TELEPHONE
	State: District:				
В.	Full Name (Last, First, Middle Initial) VISA				Transaction ID: 70411.E12641 Date of Disbursement
	Mailing Address P.O. Box 77042				$ \begin{bmatrix} M & M & M \\ 0 & 1 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 1 & 9 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{bmatrix} $
	City Madison	State WI	Zip Code 53707-1042		Amount of Each Disbursement this Period
	Purpose of Disbursement SEE BELOW				2172.15 Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate President	ement For: Primary Other (spe	General ecify) ▼		SEE BELOW
	State: District:				
C.	Full Name (Last, First, Middle Initial) Franklin Covey				Transaction ID: 70323.E12379 Date of Disbursement
	Mailing Address 6020 East 82nd Street #950				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Indianapolis	State IN	Zip Code 46250-		Amount of Each Disbursement this Period
	Purpose of Disbursement Office Supplies			001	99.89 Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
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\setminus	NAME OF COMMITTEE (In F	Full)				
$ \rangle$	Mike Pence Committee					
Α.	Full Name (Last, First, Middle Hucks Food & Fuel	Initial)				Transaction ID: 70323.E12382
	Hucks Food α Fuel					Date of Disbursement
	Mailing Address 322 Eas	$\begin{bmatrix} \begin{smallmatrix} M & 1 & M \\ 0 & 1 & M \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 9 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$				
	City Fortville		State	Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbursement		IN	46040-		28.10
	Fuel				002	Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House	Disburse	ement For:		. , , , ,	[MEMO ITEM]
	Senate		Primary	General		MEMO: FUEL
	State: Preside	ent	Other (spe	ecify)		
_	Full Name (Last, First, Middle	Initial)				T .: ID 70000 54000
В.	Quiznos	mila)				Transaction ID: 70323.E12388 Date of Disbursement
	Mailing Address 1023 M	eridian Street				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & 9 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & T \end{smallmatrix} \end{bmatrix}$
	City		State	Zip Code		Amount of Each Disbursement this Period
	Anderson		IN	46016-		11.21
	Purpose of Disbursement Volunteer Meals		007	Refund or Disposal of Excess		
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House	Disburse	ement For:			[MEMO ITEM] MEMO: VOLUNTEER MEALS
	Senate		Primary	General		MEMO. VOLONTEET MEALS
	State: Preside	ent	Other (spe	ecity) 🔻		
_	Full Name (Last, First, Middle	Initial)				Transaction ID: 70323.E12375
C.	Arts Pizza					Date of Disbursement
	Mailing Address 2027 Br	roadway				$\begin{bmatrix}\begin{smallmatrix}M&M&M\\01&M\end{smallmatrix}\end{bmatrix} \ / \ \begin{bmatrix}\begin{smallmatrix}D&D&D\\1&9\end{smallmatrix}\end{bmatrix} \ / \ \begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y\\2007&Y\end{smallmatrix}\end{bmatrix}$
	City Anderson		State IN	Zip Code 46012-		Amount of Each Disbursement this Period
	Purpose of Disbursement		111	40012-		37.03
	Volunteer meals				007	Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House	Disburse	ement For:		. 160	[MEMO ITEM]
	Senate		Primary	General		MEMO: VOLUNTEER MEALS
	State: President	ent	Other (spe	ecify) 🔻		
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<u> </u>	NAME OF COMMITTEE (In Full)	9 1.10 1.10.110	4	or any pointion				
\rangle	Mike Pence Committee							
Α.	Full Name (Last, First, Middle Initial) Barnes And Noble					Transaction ID: 70323.E12373 Date of Disbursement		
	Mailing Address 3748 E. 82ND		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$					
	City Indianapolis		State IN	Zip Code 46240-		Amount of Each Disbursement this Period		
	Purpose of Disbursement Fundraising Event Supplies				003	276.71 Refund or Disposal of Excess		
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Senate President	Disburser	ment For: Primary Other (spec	General		[MEMO ITEM] MEMO: FUNDRAISING EVENT SUPPLIES		
	State: District:			·				
В.	Full Name (Last, First, Middle Initial) MCL Cafeteria					Transaction ID: 70323.E12387 Date of Disbursement		
	Mailing Address 2109 St. Rd. 9					$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		
	City Anderson		State IN	Zip Code 46012-		Amount of Each Disbursement this Period		
	Purpose of Disbursement Meal				002	8.39 Refund or Disposal of Excess		
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Senate President	Disburser	nent For: Primary Other (spe	General cify) ▼		MEMO: MEAL		
	State: District:							
C.	Full Name (Last, First, Middle Initial) MCL Cafeteria					Transaction ID: 70323.E12386 Date of Disbursement		
	Mailing Address 2109 St. Rd. 9					01		
	City Anderson		State IN	Zip Code 46012-		Amount of Each Disbursement this Period		
	Purpose of Disbursement Meeting Meals				007	29.36 Refund or Disposal of Excess		
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Senate President	Disburser	ment For: Primary Other (spec	General cify) ▼		[MEMO: MEETING MEALS		
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	y Information copied from such Reports a for commercial purposes, other than using					for the purpose of solicating contributions licit contributions from such committee
\setminus	NAME OF COMMITTEE (In Full)					
	Mike Pence Committee					
A.	Full Name (Last, First, Middle Initial) Golden House					Transaction ID: 70323.E12376 Date of Disbursement
	Mailing Address 1222 Meridian					$\begin{bmatrix} \begin{smallmatrix} M & I & M \\ O & I & M \end{smallmatrix} & / \begin{bmatrix} \begin{smallmatrix} D & D \\ I & I \end{smallmatrix} \end{bmatrix} & / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ I & I & I & Y \end{bmatrix}$
	City Anderson		State N	Zip Code 46016-		Amount of Each Disbursement this Period
	Purpose of Disbursement Meeting Meals				007	21.61 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President		nent For: Primary Other (spe	General		[MEMO: MEETING MEALS
	State: District:		(0)00	, , •		
	Full Name (Last, First, Middle Initial)					Transaction ID: 70323.E12384
B.	Kroger					Date of Disbursement
	Mailing Address 1900 Applewood		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & I \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ I & I & I \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ I & I \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} Y & Y & Y & Y \\ I & I & I \end{smallmatrix} \end{bmatrix} \ \ \end{bmatrix}$			
	City Anderson		State N	Zip Code 46013-		Amount of Each Disbursement this Period
	Purpose of Disbursement Office Supplies	001	28.50 Refund or Disposal of Excess			
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	Disburser	nent For: Primary Other (spe	General		[MEMO: OFFICE SUPPLIES
	State: District:		C (OPC	J		
C.	Full Name (Last, First, Middle Initial) Lone Star					Transaction ID: 70323.E12374 Date of Disbursement
	Mailing Address 1721 E. 60TH S	Т.				$\begin{bmatrix}\begin{smallmatrix}M\\01\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\19\end{smallmatrix}\end{bmatrix}^D \begin{bmatrix}\begin{smallmatrix}Y\\2007\end{smallmatrix}\end{bmatrix}^Y$
	City Anderson		State N	Zip Code 46013-		Amount of Each Disbursement this Period
	Purpose of Disbursement Meeting Meals				007	67.52 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President		nent For: Primary Other (spe	General cify)		[MEMO ITEM] MEMO: MEETING MEALS
	State: District:		` .	- · · •		
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	NAME OF COMM Mike Pence Co							
Α.	Full Name (Last, F Marathon Oil C	First, Middle Initial) Company					Transaction ID: 70 Date of Disburseme	ent
	Mailing Address	539 South Main	0 1 1 1 9	['] 2007 [']				
	City Findlay			State OH	Zip Code 45840-		Amount of Each Dis	sbursement this Period
	Purpose of Disbur	sement				002	Refund or Dispo	26.60
	Candidate Name					Category/ Type	Contributions Re	equired Under
	Office Sought:	House Senate President	Disburser	nent For: Primary Other (spe	General ecify) ▼		MEMO: FUEL	
	State:	District:						
В.	Full Name (Last, F Pay Less	First, Middle Initial)					Transaction ID: 70 Date of Disburseme	
	Mailing Address 1900 Applewood Drive						01 / 19	2007
	City Anderson			State N	Zip Code 46013-		Amount of Each Dis	sbursement this Period
	Purpose of Disbur	rsement					1 L	66.30
	Office Supplies Candidate Name					001 Category/ Type	Refund or Dispo Contributions Re 11 C.F.R. 400.5	equired Under
	Office Sought:	House Senate President	Disburser	ment For: Primary Other (spe	General		MEMO: OFFICE	SUPPLIES
	State:	District:		Otrici (Spe	√ () () () () () () () () () (
C.		First, Middle Initial)					Transaction ID: 70 Date of Disburseme	
	Mailing Address	1501 W. McGall	liard Rd.				01 / 19	2007
	City Muncie			State N	Zip Code 47305-		Amount of Each Dis	sbursement this Period
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	Candidate Name					Category/ Type	Contributions Re	
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		Detailed	Summary Page		X 17 18 19a 19b 20a 20b 20c 21			
	y Information copied from such Reports and St for commercial purposes, other than using the							
\sum	NAME OF COMMITTEE (In Full)							
K	Mike Pence Committee							
A.	Full Name (Last, First, Middle Initial) Verizon Wireless				Transaction ID: 70323.E12380 Date of Disbursement 0 1 9 7 2 0 0 7			
	Mailing Address P.O. Box 630024				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & I \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ I & P \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Q & O & Y \\ Z & O & O & Y \end{bmatrix}$			
	City Dallas	State TX	Zip Code 75263-0024		Amount of Each Disbursement this Period			
	Purpose of Disbursement Telephone	001	582.90 Refund or Disposal of Excess					
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Disk Senate President	oursement For: Primary Other (spe	General ecify) ▼		[MEMO ITEM] MEMO: TELEPHONE			
	State: District:							
В.	Full Name (Last, First, Middle Initial) Verizon Wireless				Transaction ID: 70323.E12381 Date of Disbursement			
	Mailing Address P.O. Box 630024				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ I & I \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ Z & O & O \end{smallmatrix} T \end{bmatrix} $			
	City Dallas	State TX	Zip Code 75263-0024		Amount of Each Disbursement this Period			
	Purpose of Disbursement Telephone		001	476.96 Refund or Disposal of Excess				
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Disk Senate President	oursement For: Primary Other (spe	General		[MEMO: TELEPHONE			
	State: District:	Other (spe	,ony) ∀					
C.	Full Name (Last, First, Middle Initial) VISA				Transaction ID: 70411.E12638 Date of Disbursement			
	Mailing Address P.O. Box 77042				$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 0 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D & D \\ 0 & 8 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$			
	City Madison	State WI	Zip Code 53707-1042		Amount of Each Disbursement this Period			
	Purpose of Disbursement			v v	3934.93			
	SEE BELOW Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Disk	oursement For:	General	21: -	SEE BELOW			
_	President State: District:	Other (spe	ecify) 🔻					
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	CHEDULE B (FEC Form 3)	Use seperate sched	dule(s)	FOR LINE (check only	NUMBER: PAGE 119 / 150							
IT	EMIZED DISBURSEMENTS	for each category of Detailed Summary F	the	l `	X 17 18 19a 19b 20a 20b 20c 21							
	y Information copied from such Reports and St for commercial purposes, other than using the											
\setminus	NAME OF COMMITTEE (In Full)											
$ \rangle$	Mike Pence Committee											
Α.	Full Name (Last, First, Middle Initial) Arbys				Transaction ID: 70323.E12342 Date of Disbursement							
	Mailing Address 2820 Broadway				$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ 0 & 2 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 8 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{bmatrix}$							
	City Anderson	State Zip Code IN 46011-			Amount of Each D	isbursement this Period						
	Purpose of Disbursement Volunteer Meals		П	007	Defined or Disc	13.87						
	Candidate Name			Category/	Refund or Disp Contributions F 11 C.F.R. 400.	Required Under						
	Office Sought: House Disk Senate President	ursement For: Primary Ger Other (specify)	neral		[MEMO: TEM] MEMO: VOLUNTEER MEALS							
	State: District:											
В.	Full Name (Last, First, Middle Initial) Office Depot				Transaction ID: 7 Date of Disbursem	ent						
	Mailing Address 3632 Scatterfield Rd.				$0^{M}2^{M}$ 0^{M} 0^{M}	2007						
	City Anderson	State Zip Code IN 46013-			Amount of Each D	isbursement this Period						
	Purpose of Disbursement Office Supplies		П	001	114 Refund or Disposal of Excess							
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53							
	Senate President	ursement For: Primary Ger Other (specify) ▼	neral		[MEMO ITEM] MEMO: OFFICE	SUPPLIES						
	State: District:											
C.	Full Name (Last, First, Middle Initial) FTD Florists				Transaction ID: 7 Date of Disbursem	ent						
	Mailing Address 3113 Woodcreek Driv	/e			$\begin{bmatrix} 0 & 2 & 0 & 0 & 0 \\ 0 & 2 & 0 & 0 & 0 \end{bmatrix}$	2007						
	City Downers Grove	State Zip Code IL 60515-			Amount of Each D	isbursement this Period						
	Purpose of Disbursement Flowers			003	Refund or Disp	82.98						
	Candidate Name			Category/ Type	Required Under 53							
	Office Sought: House Disk Senate President	ursement For: Primary Ger Other (specify)	neral		MEMO: FLOWERS							
	State: District:											
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\setminus	NAME OF COMMITTEE (In Full)									
$ \rangle$	Mike Pence Committee									
Α.	Full Name (Last, First, Middle Initial) Quiznos				Transaction ID: 70323.E12343 Date of Disbursement					
	Mailing Address 1023 Meridian Stree	<u> </u>			$\begin{bmatrix} \begin{smallmatrix} M & M & M & J & D & D & J \\ 0 & 2 & M & J & D & 0 & J \\ \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} D & D & D \\ 2 & 0 & 0 & 7 \\ \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \\ \end{smallmatrix} \end{bmatrix}$					
	City	State Zip Code			Amount of Each	Disburseme	nt this Period			
	Anderson	IN 46016-				• • •	0.02			
	Purpose of Disbursement Meeing Meals			007	Refund or Dis					
	Candidate Name			ategory/ Type	Contributions 11 C.F.R. 40		nder			
	Office Sought: House Dis Senate President	oursement For: Primary General Other (specify) ▼	•		MEMO: MEEIN	IG MEALS	:			
	State: District:									
В.	Full Name (Last, First, Middle Initial) Aristotle International, Inc.				Transaction ID: Date of Disburse		2341			
	Mailing Address 50 E. St., SE				02 0	8 / Y	ž 0 0 7 °			
	City Washington	State Zip Code DC 20003-			Amount of Each	Disburseme	nt this Period			
	Purpose of Disbursement Software Support			001	3250.00 Refund or Disposal of Excess					
	Candidate Name			ategory/ Type	Contributions 11 C.F.R. 400	Required U				
	Office Sought: House Dis Senate President	oursement For: Primary General Other (specify) ▼	•		[MEMO ITEM] MEMO: SOFTWARE SUPPORT					
	State: District:									
C.	Full Name (Last, First, Middle Initial) Meijer				Transaction ID: 70323.E12340 Date of Disbursement					
	Mailing Address 6610 Scatterfield Ro	ad			02 0	8 / Y	ž 0 0 7 [×]			
	City Anderson	State Zip Code IN 46016-			Amount of Each	Disburseme	nt this Period			
	Purpose of Disbursement						59.61			
	Fair Supplies			004	Refund or Dis	sposal of Ex	cess			
	Candidate Name			Category/ Type Contributions Required Under 11 C.F.R. 400.53						
	Office Sought: House Dis Senate President	oursement For: Primary General Other (specify) ▼	•		MEMO: FAIR SUPPLIES					
	State: District:									
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SCHEDULE B (FEC F	Use seperate schedule	(C) -	NUMBER: PAGE 121 / 150					
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	Reports and Statements may not be sold or us han using the name and address of any politic							
NAME OF COMMITTEE (In Fu	(III)							
Full Name (Last, First, Middle II A. Meijer	,		Transaction ID: 70323.E12346 Date of Disbursement 0 2 M / D 8 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Mailing Address 6610 Sca	atterfield Road		0 2 0 0 7					
City Anderson	State Zip Code IN 46016-		Amount of Each Disbursement this Period					
Purpose of Disbursement Office Supplies Candidate Name Office Sought: House	Disbursement For:	001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]					
Senate Presider State: District:	Primary General Other (specify)	al	MEMO: OFFICE SUPPLIES					
Full Name (Last, First, Middle In Kentucky Fried Chicken	nitial)		Transaction ID: 70323.E12345 Date of Disbursement 0 2 M / D 8 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Mailing Address 1595 S. I	Memorial Dr.							
City New Castle	State Zip Code IN 47362-		Amount of Each Disbursement this Period					
Purpose of Disbursement Volunteer Meals Candidate Name		007 Category/	23.53 Refund or Disposal of Excess Contributions Required Under					
Office Sought: House Senate Presider State: District:	Disbursement For: Primary General Other (specify)	Туре	11 C.F.R. 400.53 [MEMO ITEM] MEMO: VOLUNTEER MEALS					
Full Name (Last, First, Middle II) USPS	nitial)		Transaction ID: 70323.E12350 Date of Disbursement					
Mailing Address 1505 Rai	ble Rd		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$					
City Anderson	State Zip Code IN 46011-		Amount of Each Disbursement this Period					
Purpose of Disbursement Postage		003	43.55 Refund or Disposal of Excess					
Candidate Name		Category/ Type	Contributions Required Under					
Office Sought: Senate Presider State: District:	Disbursement For: Primary General Other (specify)	al	MEMO: POSTAGE					
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SCHEDULE B (FEC Form 3) Use seperate schedule(s				FOR LINE	NE NUMBER: PAGE 122 / 150		
_	EMIZED DISBURSEMENTS	for each cate Detailed Sun	nmary Page		X 17 18 19a 19b 20a 20b 20c 21		
	y Information copied from such Reports and State for commercial purposes, other than using the na						
\rangle	NAME OF COMMITTEE (In Full) Mike Pence Committee						
Α.	Full Name (Last, First, Middle Initial) Wendys Mailing Address 1805 ST RD 109 City Anderson Purpose of Disbursement Volunteer Meals		ip Code 6013-	007	Transaction ID: 70323.E12344 Date of Disbursement M 2 M / D 8 / Y 2 0 0 7 Amount of Each Disbursement this Period		
	Candidate Name	sement For: Primary Other (specify	General	007 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: VOLUNTEER MEALS		
В.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address P.O. Box 630024				Transaction ID: 70323.E12349 Date of Disbursement		
	City Dallas Purpose of Disbursement Telephone Candidate Name Office Sought: House Senate President State: District:		General	001 Category/ Type	Amount of Each Disbursement this Period 264.98 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: TELEPHONE		
C.	Full Name (Last, First, Middle Initial) VISA Mailing Address P.O. Box 77042 City Madison Purpose of Disbursement SEE BELOW Candidate Name Office Sought: House Disbur Senate President		General	Category/ Type	Transaction ID: 70411.E12639 Date of Disbursement M M M / D B / Y Y Y O Y Y Amount of Each Disbursement this Period 168.63 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SEE BELOW		
	State: District:				160 60		
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	y Information copied from such Reports and S for commercial purposes, other than using the				
\	NAME OF COMMITTEE (In Full)	Traine and address of any pointed of			
\rangle	Mike Pence Committee				
Α.	Full Name (Last, First, Middle Initial) Staples			Transaction ID: 70323.E12351 Date of Disbursement	
	Mailing Address 1501 W. McGalliard	Rd.		$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ O & Z & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & B \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & T \end{smallmatrix} \end{bmatrix}$	
	City Muncie	State Zip Code IN 47305-		Amount of Each Disbursement this Period	
	Purpose of Disbursement Office Supplies		001	63.69 Refund or Disposal of Excess	
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
	Senate President	bursement For: Primary General Other (specify) ▼		MEMO: OFFICE SUPPLIES	
_	State: District:				
В.	Full Name (Last, First, Middle Initial) Cato Travel			Transaction ID: 70323.E12353 Date of Disbursement	
	Mailing Address 1925 N. LYNN ST, S	$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ O & Z & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & B \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & T \end{smallmatrix} \end{bmatrix}$			
	City Arlington	Amount of Each Disbursement this Period			
	Purpose of Disbursement Travel Service	20.00			
	Candidate Name	l	002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Dis Senate President	bursement For: Primary General Other (specify)	71	[MEMO: TRAVEL SERVICE	
	State: District:	canon (opening) •			
C.	Full Name (Last, First, Middle Initial) VISA			Transaction ID: 70323.E12352 Date of Disbursement	
	Mailing Address P.O. Box 77042			$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ O & Z & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & B \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & T \end{smallmatrix} \end{bmatrix}$	
	City Madison	State Zip Code WI 53707-1042		Amount of Each Disbursement this Period	
	Purpose of Disbursement Bank Fee	001	35.00 Refund or Disposal of Excess		
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
	Office Sought: House Dis Senate President	bursement For: Primary General Other (specify) ▼		MEMO: BANK FEE	
	State: District:				
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SCHEDULE B (FEC Form 3)			Use seperate schedule(s) for each category of the		E NUMBER: PAGE 124 / 150 ly one)									
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	Mike Pence Committee													
Α.	Full Name (Last, First, Middle Initial) VISA						Da	e of	Di	sburs				
	Mailing Address P.O. Box 77042	2					O]) ė		` 2	2007
	City Madison		State WI	Zip Code 53707-1042			Am	oun	t of	Eacl	n C	isbur	eme	nt this Period
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	Candidate Name					ategory/ Type				ution .R. 4		Requir .53	ed U	nder
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General ecify) ▼			SE	ЕΒ	EL	OW				
	State: District:													
В.	Full Name (Last, First, Middle Initial) Applebees							e of	Di	sburs	en			
	Mailing Address 1922 East 53rd Street							02 007						
	City State Zip Code Anderson IN 46013-							Amount of Each Disbursement this Period						
	Purpose of Disbursement Meeting Meals Candidate Name						25.44 Refund or Disposal of Excess							
							FNAE	11 (C.F	.R. 4	00	Requir .53	ed U	nder
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General ♥			_			TEM (EE)	-	IG M	EAL:	S
	State: District:													
C.	Full Name (Last, First, Middle Initial) Sports Promotion Network						1			sburs	en		.E12	2322
	Mailing Address 2985 St. Rd. 36 Suite 160	60					02							
	City Grand Prairie		State TX	Zip Code 75052-			Am	oun	t of	Eacl	n C	isbur	eme	nt this Period
	Purpose of Disbursement Advertising		316.4 Refund or Disposal of Excess											
	Candidate Name Cate Ty							11 (C.F	oution .R. 4 TEM	00	Requir .53	ed U	nder
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<u> </u>		(ontional)						•					-	2887.36
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	y Information copied from such Reports and Stat for commercial purposes, other than using the na								
\setminus	NAME OF COMMITTEE (In Full)								
\backslash	Mike Pence Committee								
Α.	Full Name (Last, First, Middle Initial) Amoco Oil Co.				Transaction ID: 7 Date of Disbursem	nent			
	Mailing Address P.O. Box 4441				02 08	2007			
	City Carol Stream	State IL	Zip Code 60197-		Amount of Each D	isbursement this Period			
	Purpose of Disbursement Fuel			002	Refund or Disp				
	Candidate Name			Category/ Type	Contributions F 11 C.F.R. 400. [MEMO ITEM]				
	Senate President	rsement For: Primary Other (spe	General ecify) ▼		MEMO: FUEL				
	State: District:								
В.	Full Name (Last, First, Middle Initial) Amoco Oil Co.				Transaction ID: 70 Date of Disbursem	nent			
	Mailing Address P.O. Box 4441				02 0 0 8 7 2 0 0 7				
	City Carol Stream	State IL	Zip Code 60197-		Amount of Each D	isbursement this Period			
	Purpose of Disbursement Fuel		002	24.54 Refund or Disposal of Excess					
	Candidate Name			Category/ Type	Contributions F				
	Office Sought: House Disbu Senate President	rsement For: Primary Other (spe	General ecify) ▼		[MEMO ITEM] MEMO: FUEL				
	State: District:								
C.	Full Name (Last, First, Middle Initial) Elder Beerman				Transaction ID: 7 Date of Disbursem	nent			
	Mailing Address 2101 S. Scatterfield Ro		02 0 0 8 7 2 0 0 7						
	City Anderson	State IN	Zip Code 46013-		Amount of Each Disbursement this Period				
	Purpose of Disbursement Fundraising Mementos		003	83.06 Refund or Disposal of Excess					
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53						
	Office Sought: House Disbu Senate President State: District:	Primary Other (spe	General ecify) ▼		[MEMO ITEM] MEMO: FUNDR/	AISING MEMENTOS			
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SCHEDULE B (FEC Form 3)			e seperate schedule(s)		NUMBER: PAGE 126 / 150		
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name						
\rangle	NAME OF COMMITTEE (In Full) Mike Pence Committee						
Α.	Full Name (Last, First, Middle Initial) MCL Cafeteria Mailing Address 2109 St. Rd. 9				Transaction ID: 70323.E12317 Date of Disbursement		
	City Anderson	State Zip CIN 460			Amount of Each Disbursement this Period		
	Purpose of Disbursement Volunteer Meals Candidate Name		C	007 category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (specify)	General	Туре	[MEMO ITEM] MEMO: VOLUNTEER MEALS		
В.	Full Name (Last, First, Middle Initial) Evas Pancake House Mailing Address 831 Broadway				Transaction ID: 70323.E12330 Date of Disbursement O 2		
		State Zip 0			Amount of Each Disbursement this Period		
	Purpose of Disbursement Meeting Meals Candidate Name				21.51 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (specify)	General	Туре	[MEMO ITEM] MEMO: MEETING MEALS		
C .	Full Name (Last, First, Middle Initial) Bruners Family Restaurant				Transaction ID: 70323.E12336 Date of Disbursement		
	Mailing Address 2200 W Kilgore Ave.				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 2 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 0 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$		
	City Muncie		Amount of Each Disbursement this Period				
	Purpose of Disbursement Meeting Meals	002	18.00 Refund or Disposal of Excess				
	Office Sought: House Disburse Senate	ement For:	General	ategory/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: MEETING MEALS		
	President State: District:	Other (specify)					
s	UBTOTAL of Disbursements This Page (optional)			<u>}</u>	0.00		

ITEMIZED DISBURSEMENTS	Lica congrata congdula(c)	FOR LINE NUMBER: PAGE 127 / 150 (check only one)
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NAME OF COMMITTEE (In Full) Mike Pence Committee		
Full Name (Last, First, Middle Initial) A. Bruners Family Restaurant Mailing Address 2200 W Kilgore Ave.		Transaction ID: 70323.E12334 Date of Disbursement O 2 M / O 8 / Y Y Y O O 7
City Muncie	State Zip Code IN 47304-	Amount of Each Disbursement this Period
Purpose of Disbursement Meeting Meals Candidate Name Office Sought: House Disbur Senate President	Cat	26.02 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: MEETING MEALS
State: District: Full Name (Last, First, Middle Initial) B. Anderson Herald - Bulletin		Transaction ID: 70323.E12326 Date of Disbursement
Mailing Address 1133 Jackson St.	02 7 0 8 7 2 0 0 7	
City Anderson Purpose of Disbursement Subscription Candidate Name	Cat	Amount of Each Disbursement this Period 14.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President State: District:	rsement For: Primary General Other (specify)	[MEMO ITEM] MEMO: SUBSCRIPTION
Full Name (Last, First, Middle Initial) C. The Congressional Institute		Transaction ID: 70323.E12319 Date of Disbursement
Mailing Address 316 Pennsylvania Ave.	, Se #403	02 7 08 7 2007
City Washington	State Zip Code DC 20003-	Amount of Each Disbursement this Period
Purpose of Disbursement Lodging and Meals Candidate Name	Cat	1429.50 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disbur Senate President State: District:	rsement For: Primary General Other (specify)	[MEMO ITEM] MEMO: LODGING AND MEALS
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SCHEDULE B (FEC Form 3)				FOR LINE	NUMBER: PAGE 128 / 150		
	EMIZED DISBURSEMENTS	Use seperate scriedule(s)			lly one)		
_		Detail	ed Summary Page	-	X 17 18 19a 19b 20a 20b 20c 21		
	y Information copied from such Reports and for commercial purposes, other than using t						
Ν	NAME OF COMMITTEE (In Full)						
	Mike Pence Committee						
A.	Full Name (Last, First, Middle Initial) Wall Street Journal				Transaction ID: 70323.E12328 Date of Disbursement		
	Mailing Address 84 Second Ave.				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & Z \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & B \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y \\ Q & O & O \end{smallmatrix} T \\ & Q & O & O \end{smallmatrix} $		
	City Chicopee	State MA	Zip Code 01020-		Amount of Each Disbursement this Period		
	Purpose of Disbursement Subscription			001	232.98 Refund or Disposal of Excess		
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Senate President	Disbursement Fo		Турс	[MEMO ITEM] MEMO: SUBSCRIPTION		
	State: District:						
В.	Full Name (Last, First, Middle Initial) Walmart				Transaction ID: 70323.E12321 Date of Disbursement		
	Mailing Address 4420 Scatterfield	Rd.			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		
	City Anderson	State IN	Zip Code 46013-		Amount of Each Disbursement this Period		
	Purpose of Disbursement Office Supplies	001	116.39 Refund or Disposal of Excess				
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Senate President	Disbursement Fo			[MEMO: OFFICE SUPPLIES		
	State: District:	(opeoy) V				
C.	Full Name (Last, First, Middle Initial) HSN				Transaction ID: 70323.E12316 Date of Disbursement		
	Mailing Address 1 HSN Drive				$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ 0 & 2 & M \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ 0 & 0 & 8 \end{smallmatrix} & \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$		
	City Saint Petersburg	State FL	Zip Code 33729-		Amount of Each Disbursement this Period		
	Purpose of Disbursement Office Supplies	001	159.98 Refund or Disposal of Excess				
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Senate President	Disbursement Fo			[MEMO: OFFICE SUPPLIES		
	State: District:		1 3/ ▼				
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SCHEDULE B (FEC Form 3)		Use seperate schedule(s) (check		OR LINE NUMBER: PAGE 129 / 150 check only one)			
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21			
	y Information copied from such Reports and Statem for commercial purposes, other than using the name						
$\overline{}$	NAME OF COMMITTEE (In Full)						
\rangle	Mike Pence Committee						
A.	Full Name (Last, First, Middle Initial) The Star Press			Transaction ID: 70323.E12324 Date of Disbursement			
	Mailing Address PO BOX 2408			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$			
	Muncie	State Zip Code IN 47307-		Amount of Each Disbursement this Period			
	Purpose of Disbursement Subscription		001	14.10 Refund or Disposal of Excess			
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		[MEMO ITEM] MEMO: SUBSCRIPTION			
	State: District:						
В.	Full Name (Last, First, Middle Initial) Symantec			Transaction ID: 70323.E12320 Date of Disbursement			
	Mailing Address 20330 STEVENS CREEK		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				
	City Cupertino	State Zip Code CA 95014-		Amount of Each Disbursement this Period			
	Purpose of Disbursement Software	001	Refund or Disposal of Excess				
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]				
	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		MEMO: SOFTWARE			
	State: District:						
C.	Full Name (Last, First, Middle Initial) New York Times			Transaction ID: 70323.E12325 Date of Disbursement			
	Mailing Address 229 W. 43RD ST.			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$			
	City New York	State Zip Code NY 10036-		Amount of Each Disbursement this Period			
	Purpose of Disbursement Subscription		001	25.20 Refund or Disposal of Excess			
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Senate President	ement For: Primary General Other (specify)		MEMO: SUBSCRIPTION			
	State: District:						
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SCHEDULE B (FEC Form 3)			FOR LINE	NUMBER: PAGE 130 / 150				
	EMIZED DISBURSEMENTS	I I I I I I I I I I I I I I I I I I I			ly one)			
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	y Information copied from such Reports and Stater for commercial purposes, other than using the nam							
Ν	NAME OF COMMITTEE (In Full)							
V	Mike Pence Committee							
Α.	Full Name (Last, First, Middle Initial) Wendys				Transaction ID: 70323.E12337			
					Date of Disbursement			
	Mailing Address 1805 ST RD 109				$\begin{bmatrix} M & M $			
	City Anderson	State IN	Zip Code 46013-		Amount of Each Disbursement this Period			
	Purpose of Disbursement		100.0		4.16			
	Meal			002	Refund or Disposal of Excess			
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Disburse	ement For:		. , , , ,	[MEMO ITEM]			
	Senate	Primary	General		MEMO: MEAL			
	President State: District:	Other (spe	cify)					
	Full Name (Last, First, Middle Initial)				Turner 10 70444 540004			
В.	VISA				Transaction ID: 70411.E12634 Date of Disbursement			
	Mailing Address D.O. D. 77040				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$			
	Mailing Address P.O. Box 77042							
	City	State WI	Zip Code 53707-1042		Amount of Each Disbursement this Period			
	Madison Purpose of Disbursement	3470.76						
	SEE BELOW	Refund or Disposal of Excess						
	Candidate Name	Category/	Contributions Required Under 11 C.F.R. 400.53					
	Office Courbby House Dishure			Туре	11 0.1 .11. 400.30			
	Office Sought: House Disburse Senate	ement For: Primary	General		SEE BELOW			
	President	Other (spe						
	State: District:							
C.	Full Name (Last, First, Middle Initial) FTD Florists				Transaction ID: 70323.E12285 Date of Disbursement			
	McTan Address				03 14 2007			
	Mailing Address 3113 Woodcreek Drive				03 14 2007			
	City Downers Grove	State IL	Zip Code 60515-		Amount of Each Disbursement this Period			
	Purpose of Disbursement	IL	00313		79.50			
	Flowers	Refund or Disposal of Excess						
	Candidate Name	Contributions Required Under						
	· H	ement For:			MEMO: FLOWERS			
	Senate President	Primary	General					
	State: District:	Other (spe	Giry) ♥					
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s	UBTOTAL of Disbursements This Page (optional)			>	3470.76			

SCHEDULE B (FEC Form 3)				FOR LINE NUMBER: PAGE 1:				
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		Detaile	d Summary Page		X 17 18 19a 19b 20a 20b 20c 21			
	y Information copied from such Reports and for commercial purposes, other than using t							
Ν	NAME OF COMMITTEE (In Full)							
V	Mike Pence Committee							
Α.	Full Name (Last, First, Middle Initial) Arizona Inn				Transaction ID: 70323.E12303 Date of Disbursement			
	Mailing Address 2200 East Elm Str	reet			$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} \begin{smallmatrix} M \\ J \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} D \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} D \\ J \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ J \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ J \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ J \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ J \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ J \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ J \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ J \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ J \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ J \end{smallmatrix} \end{bmatrix} 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	City Tucson	State AZ	Zip Code 85719-		Amount of Each Disbursement this Period			
	Purpose of Disbursement Lodging		I	002	425.67 Refund or Disposal of Excess			
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Senate President	Disbursement For: Primary Other (s	General pecify) ▼	.,,,,,	[MEMO ITEM] MEMO: LODGING			
	State: District:							
В.	Full Name (Last, First, Middle Initial) US Airways				Transaction ID: 70323.E12299 Date of Disbursement			
	Mailing Address P.O. Box 2562	$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} $						
	City Winston - Salem	State NC	Zip Code 27102-		Amount of Each Disbursement this Period			
	Purpose of Disbursement Air Travel		002	409.80 Refund or Disposal of Excess				
	Candidate Name		, i	Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Senate President	Disbursement For: Primary Other (s	General pecify) ▼		[MEMO: ITEM] MEMO: AIR TRAVEL			
	State: District:		•					
C.	Full Name (Last, First, Middle Initial) US Airways				Transaction ID: 70323.E12298 Date of Disbursement			
	Mailing Address P.O. Box 2562				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$			
	City Winston - Salem	State NC	Zip Code 27102-		Amount of Each Disbursement this Period			
	Purpose of Disbursement Air Travel	002	409.80 Refund or Disposal of Excess					
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Senate President	Disbursement For: Primary Other (s	General pecify) ▼		[MEMO ITEM] MEMO: AIR TRAVEL			
_	State: District:							
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		Detailed			X 17 18 19a 19b 20a 20b 20c 21			
	y Information copied from such Reports and S for commercial purposes, other than using the							
\setminus	NAME OF COMMITTEE (In Full)							
V	Mike Pence Committee							
Α.	Full Name (Last, First, Middle Initial) Amazon.com Mailing Address P.O. Box2814				Transaction ID: 70323.E12286 Date of Disbursement 0 3			
	P.O. BOX2814							
	City Omaha	State NE	Zip Code 68103-		Amount of Each Disbursement this Period			
	Purpose of Disbursement Office Supplies			001	7.49 Refund or Disposal of Excess			
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Senate President	bursement For: Primary Other (spe	General ecify) ▼	71-1	[MEMO: OFFICE SUPPLIES			
	State: District:							
В.	Full Name (Last, First, Middle Initial) Frischs Anderson				Transaction ID: 70323.E12289 Date of Disbursement			
	Mailing Address 2121N. BROADWA	$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ I & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ I & 2 & O & O & T \end{smallmatrix} \end{bmatrix}$						
	City Anderson	State IN	Zip Code 46011-		Amount of Each Disbursement this Period			
	Purpose of Disbursement Meeting Meals	007	19.00 Refund or Disposal of Excess					
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Dis Senate President	bursement For: Primary Other (spe	General		[MEMO ITEM] MEMO: MEETING MEALS			
	State: District:	Other (opt	5 011 y) ▼					
C.	Full Name (Last, First, Middle Initial) Indiana Bureau Of Motor Vehicles				Transaction ID: 70323.E12304 Date of Disbursement			
	Mailing Address 3 W. 5TH ST.				$\begin{bmatrix}\begin{smallmatrix}M\\03\end{smallmatrix}\end{bmatrix}^M \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$			
	City Anderson	State IN	Zip Code 46016-		Amount of Each Disbursement this Period			
	Purpose of Disbursement			• •	46.75			
	Vehicle Plates Candidate Name			002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Dis Senate President	bursement For: Primary	General	- 764	[MEMO ITEM] MEMO: VEHICLE PLATES			
	State: District:	Other (spe	5 ∪iiy) ▼					
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SCHEDULE B (FEC Form 3)				FORLINE	E NUMBER: PAGE 133 / 150			
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_		Detailed	Summary Page		X 17 18 19a 19b 20a 20b 20c 21			
	y Information copied from such Reports and S for commercial purposes, other than using the							
Λ	NAME OF COMMITTEE (In Full)							
\mathbb{Z}	Mike Pence Committee							
Α.	Full Name (Last, First, Middle Initial) Indiana Bureau Of Motor Vehicles	Transaction ID: 70323.E12305 Date of Disbursement						
	Mailing Address 3 W. 5TH ST.		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 1 & 0 \\ 1 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} $					
	City Anderson	State IN	Zip Code 46016-		Amount of Each Disbursement this Period			
	Purpose of Disbursement Vehicle Plates			002	60.75 Refund or Disposal of Excess			
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Senate President	bursement For: Primary Other (spe	General ecify) ▼	··	[MEMO: VEHICLE PLATES			
	State: District:							
В.	Full Name (Last, First, Middle Initial) Expedia				Transaction ID: 70323.E12301 Date of Disbursement			
	Mailing Address P.O. Box 2814				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} & \begin{smallmatrix} D & D \\ O & 1 & 4 \end{smallmatrix} & \begin{smallmatrix} Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$			
	City Omaha	State NE	Zip Code 68103-		Amount of Each Disbursement this Period			
	Purpose of Disbursement Air Travel and Lodging		002	1427.58 Refund or Disposal of Excess				
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Dis Senate President	bursement For: Primary Other (spe	General ecify) ▼		[MEMO: ITEM] MEMO: AIR TRAVEL AND LODG-ING			
	State: District:		•					
C.	Full Name (Last, First, Middle Initial) Anderson Herald - Bulletin				Transaction ID: 70323.E12295 Date of Disbursement			
	Mailing Address 1133 Jackson St.		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 3 \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{bmatrix} \end{bmatrix}$					
	City Anderson	State IN	Zip Code 46016-		Amount of Each Disbursement this Period			
	Purpose of Disbursement				14.00			
	Subscription	001	Refund or Disposal of Excess					
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]				
	Office Sought: House Dis Senate President	bursement For: Primary Other (spe	General		MEMO: SUBSCRIPTION			
	State: District:	301 (30)	J) V					
s	UBTOTAL of Disbursements This Page (option	onal)		<u></u>	0.00			

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	y Information copied from such Reports and Stater for commercial purposes, other than using the nam							
\rangle	NAME OF COMMITTEE (In Full) Mike Pence Committee							
Α.	Full Name (Last, First, Middle Initial) Wall Street Journal Mailing Address 84 Second Ave.					Transaction ID: 70323.E12297 Date of Disbursement O 3 M / D 1 4 V Y Y O 7 Y		
	City	State MA	Zip Code 01020-			Amount of Each Disbursement this Period		
	Chicopee Purpose of Disbursement Subscription Candidate Name	IVIA	01020-	-	001	17.98 Refund or Disposal of Excess Contributions Required Under		
		ement For: Primary Other (spe	General ecify) ▼		egory/ ype	11 C.F.R. 400.53 [MEMO ITEM] MEMO: SUBSCRIPTION		
В.	Full Name (Last, First, Middle Initial)					Transaction ID: 70323.E12288 Date of Disbursement M 3 M / D 1 D / Y 2 0 0 7 Y		
	City Anderson	State IN	Zip Code 46013-			Amount of Each Disbursement this Period		
	Purpose of Disbursement Meeting Meals Candidate Name	Cat	007 tegory/ type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Disburs	ement For: Primary Other (spe	General ♥		71	[MEMO ITEM] MEMO: MEETING MEALS		
<u>С</u> .	Full Name (Last, First, Middle Initial) US House Members Dining					Transaction ID: 70323.E12287 Date of Disbursement		
	Mailing Address Longworth HOB					$\begin{bmatrix}\begin{smallmatrix}M\\03\end{smallmatrix}\end{bmatrix}^M \begin{smallmatrix}D\\14\end{smallmatrix}\end{bmatrix}^D \begin{smallmatrix}Y\\2007\end{smallmatrix}$		
	City Washington	State DC	Zip Code 20515-			Amount of Each Disbursement this Period		
	Purpose of Disbursement Meeting Meals Candidate Name			Cat	007 tegory/ type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Senate President State: District:	ement For: Primary Other (spe	General ♥			[MEMO ITEM] MEMO: MEETING MEALS		
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SCHEDULE B (FEC Form 3		-	Use seperate schedule(s) (check			NUMBER: PAGE 135 / 150
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	y Information copied from such Reports a for commercial purposes, other than using					for the purpose of solicating contributions olicit contributions from such committee
\setminus	NAME OF COMMITTEE (In Full)					
$ \rangle$	Mike Pence Committee					
Α.	Full Name (Last, First, Middle Initial) HSN					Transaction ID: 70323.E12291 Date of Disbursement 0 3 4 7 1 4 7 2 0 0 7
	Mailing Address 1 HSN Drive					03 14 2007
	City Saint Petersburg		State FL	Zip Code 33729-		Amount of Each Disbursement this Period
	Purpose of Disbursement Office Supplies				001	159.98 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General cify) ▼		[MEMO ITEM] MEMO: OFFICE SUPPLIES
	State: District:					
В.	Full Name (Last, First, Middle Initial) USPS					Transaction ID: 70323.E12292 Date of Disbursement
	Mailing Address 1505 Raible Rd					$\begin{bmatrix} \begin{array}{cccccccccccccccccccccccccccccccccccc$
	City Anderson		State IN	Zip Code 46011-		Amount of Each Disbursement this Period
	Purpose of Disbursement Postage	001	59.99 Refund or Disposal of Excess			
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General cify) ▼		[MEMO: POSTAGE
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C.	Full Name (Last, First, Middle Initial) The Star Press					Transaction ID: 70323.E12294 Date of Disbursement
	Mailing Address PO BOX 2408					$\begin{bmatrix} M & M $
	City Muncie		State IN	Zip Code 47307-		Amount of Each Disbursement this Period
	Purpose of Disbursement Subscription				001	14.10 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General cify) ▼		[MEMO: SUBSCRIPTION
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SCHEDULE B (FEC Form 3)		Use seperate schedule(s)	FOR LINE	FOR LINE NUMBER: PAGE 136 / 150				
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	ny Information copied from such Reports and State			for the purpose of solicating contributions				
or	for commercial purposes, other than using the nam	e and address of any political of	committee to so	olicit contributions from such committee				
$ \rangle$	NAME OF COMMITTEE (In Full) Mike Pence Committee							
V	wike Perice Committee							
Α.	Full Name (Last, First, Middle Initial)			Transaction ID: 70323.E12290 Date of Disbursement				
Α.	TGI FRIDAYS	TGI FRIDAYS						
	Mailing Address Travel Meals	03 14 2007						
	City Indianapolis	State Zip Code IN 46254-		Amount of Each Disbursement this Period				
	Purpose of Disbursement		· · ·	20.58				
	Meals Candidate Name		002	Refund or Disposal of Excess Contributions Required Under				
	Candidate Name		Category/ Type	11 C.F.R. 400.53				
	Office Sought: House Disburs	ement For:		[MEMO ITEM] MEMO: MEALS				
	Senate	Primary General		WEING. WEALS				
	President State: District:	Other (specify)						
_	Full Name (Last, First, Middle Initial)			Transaction ID: 70323.E12293				
В.				Date of Disbursement				
	Mailing Address 220 W 42PD ST	Mailing Address 229 W. 43RD ST.						
	ZZ9 W. 43ND 31.	03						
	City New York	State Zip Code NY 10036-		Amount of Each Disbursement this Period				
	Purpose of Disbursement		25.20					
	Subscription	001	Refund or Disposal of Excess Contributions Required Under					
	Candidate Name	Category/ Type	11 C.F.R. 400.53					
	Office Sought: House Disburs	ement For:	71	MEMO: SUBSCRIPTION				
	Senate	Primary General		MEMO. SUBSCRIPTION				
	President State: District:	Other (specify) ▼						
	Full Name (Last, First, Middle Initial)			Transaction ID: 70411.E12635				
C.	VISA			Date of Disbursement				
	Mailing Address P.O. Box 77042	$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix}$						
	City Madison	State Zip Code WI 53707-1042		Amount of Each Disbursement this Period				
	Purpose of Disbursement		284.67					
	SEE BELOW		Refund or Disposal of Excess					
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
		ement For:		SEE BELOW				
	Senate President	Primary General Other (specify) ▼		_				
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	y Information copied from such Repo for commercial purposes, other than						
\rangle	NAME OF COMMITTEE (In Full) Mike Pence Committee						
Α.	Full Name (Last, First, Middle Initial Arbys)				Transaction ID: 70: Date of Disburseme	nt
	Mailing Address 2820 Broadv	vay				03 14	Y 2007
	City Anderson		State IN	Zip Code 46011-		Amount of Each Dis	bursement this Period
	Purpose of Disbursement Volunteer Meals				007	Refund or Dispo	21.23
	Candidate Name	Category/ Type	Contributions Re 11 C.F.R. 400.53	equired Under			
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General ▼		MEMO: VOLUNTI	EER MEALS
	State: District:						
В.	Full Name (Last, First, Middle Initial) Squeeze Play)				Transaction ID: 70 Date of Disburseme	nt
	Mailing Address Mounds Mall					03 14	2007
	City Anderson		State IN	Zip Code 46013-		Amount of Each Dis	bursement this Period
	Purpose of Disbursement Mementos				000	1	149.99
	Candidate Name		003 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General		MEMO: MEMENT	os
	State: District:		(√			
C.	Full Name (Last, First, Middle Initial) Hobby Lobby)				Transaction ID: 70	
	Mailing Address 1804 N. Stat	03 / 14	2007				
	City Anderson		State IN	Zip Code 46012-		Amount of Each Dis	bursement this Period
	Purpose of Disbursement Fundraising Event Supplies				003	Refund or Dispo	16.93
	Candidate Name				Category/ Type	Contributions Re	
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General ▼		MEMO: FUNDRA SUPPLIES	ISING EVENT
_	State: District:						
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SCHEDULE B (FEC Form 3)				NE NUMBER: PAGE 138 / 150		
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_		Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21		
	y Information copied from such Reports and State for commercial purposes, other than using the nan					
Λ	NAME OF COMMITTEE (In Full)					
V	Mike Pence Committee					
Α.	Full Name (Last, First, Middle Initial) KMART			Transaction ID: 70323.E12308 Date of Disbursement		
	Mailing Address 2828 Broadway			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$		
	City Anderson	State Zip Code IN 46012-		Amount of Each Disbursement this Period		
	Purpose of Disbursement	110 40012-		85.36		
	Office Supplies Candidate Name		001 Category/	Refund or Disposal of Excess Contributions Required Under		
	oundate Name		Type	11 C.F.R. 400.53		
	Office Sought: House Senate President	ement For: Primary General Other (specify) ▼		MEMO: OFFICE SUPPLIES		
	State: District:					
В.	Full Name (Last, First, Middle Initial) Wendys			Transaction ID: 70323.E12310 Date of Disbursement		
	Mailing Address 1805 ST RD 109	$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$				
	City Anderson	State Zip Code IN 46013-		Amount of Each Disbursement this Period		
	Purpose of Disbursement Volunteer Meals	007	11.16 Refund or Disposal of Excess			
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Disburs Senate	ement For: Primary General		[MEMO ITEM] MEMO: VOLUNTEER MEALS		
	State: President District:	Other (specify) ▼				
C.	Full Name (Last, First, Middle Initial) VISA			Transaction ID: 70411.E12636 Date of Disbursement		
	Mailing Address P.O. Box 77042			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$		
	City Madison	State Zip Code WI 53707-1042		Amount of Each Disbursement this Period		
	Purpose of Disbursement SEE BELOW		419.77			
	Candidate Name	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
	Senate	ement For: Primary General		SEE BELOW		
_	President State: District:	Other (specify) ▼				
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name										
\vdash	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,								
\geq	Mike Pence Committee										
Α.	Full Name (Last, First, Middle Initial) Pelican Grand					Date o	of Dis	burse	ment		
	Mailing Address 2000 North Ocean Blvd					0 ^M 3	M /	1	4		ž 0 ŏ 7 ×
	Fort Lauderdale	State FL	Zip Code 33305-			Amou	nt of	Each I	Disb	urseme	ent this Period
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	Candidate Name				ategory/ Type		C.F.	R. 400		uired U	nder
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В.	Full Name (Last, First, Middle Initial) Pelican Grand					Date o	of Dis	burse	ment	23.E12 t	2313
	Mailing Address 2000 North Ocean Blvd						M /	^D 1	4	Y	ž 0 0 7 °
		State FL	Zip Code 33305-			Amou	nt of	Each I	Disb	urseme	ent this Period
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	Senate President	ment For: Primary Other (spe	General ecify) ▼			MEMO		-	EL M	1EAL	
	State: District:										
C.	Full Name (Last, First, Middle Initial) US Airways					Date o		burse	ment	-	
	Mailing Address P.O. Box 2562					0 ^M 3	IVI /	1	4		2 0 0 7 °
		State NC	Zip Code 27102-			Amou	nt of	Each I	Disb	urseme	ent this Period
	Purpose of Disbursement Air Travel	Г	002	D.	ofund	or Dio		al of Ev	135.19		
	Candidate Name				ategory/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ♥			(MEM		-	≀AVI	EL	
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NAME OF COMMITTEE (In Full) Mike Pence Committee			
Full Name (Last, First, Middle Initial) Cato Travel Mailing Address 1925 N. LYNN ST	, STE. 801		Transaction ID: 70323.E12315 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Arlington	State Zip Code VA 22209-		Amount of Each Disbursement this Period
Senate President	Disbursement For: Primary General Other (specify)	002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: TRAVEL SERVICE
State: District: Full Name (Last, First, Middle Initial) Mikah Wilson Mailing Address 12700 W Arrowhe	ad Dr		Transaction ID: 70411.E12491 Date of Disbursement O 1
City Daleville Purpose of Disbursement salary Candidate Name	State Zip Code IN 47334-	001 Category/ Type	Amount of Each Disbursement this Period 623.20 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: Senate President State: District:	Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼	71	SALARY
Full Name (Last, First, Middle Initial) Mikah Wilson			Transaction ID: 70411.E12492 Date of Disbursement
Mailing Address 12700 W Arrowhe	ad Dr.		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & Y \\ 2 & O & O & 7 \end{smallmatrix} $
City Daleville	State Zip Code IN 47334-		Amount of Each Disbursement this Period
Purpose of Disbursement salary Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: Senate President State: District:	Disbursement For: Primary General Other (specify) ▼		SALARY
SUBTOTAL of Disbursements This Page (or	otional)		1246.40

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		Use seperate schedule(s) for each category of the	FOR LINE (check on	E NUMBER: PAGE 141 / 150 ly one)
		Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports and Statem for commercial purposes, other than using the name			
\rangle	NAME OF COMMITTEE (In Full) Mike Pence Committee			
Α.	Full Name (Last, First, Middle Initial) Mikah Wilson			Transaction ID: 70411.E12493 Date of Disbursement
	Mailing Address 12700 W Arrowhead Dr.		$ \begin{bmatrix} M & M & M & M & M & M & M & M & M & M &$	
		State Zip Code IN 47334-		Amount of Each Disbursement this Period
	Purpose of Disbursement salary Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: Senate President State: Disburse	ment For: Primary General Other (specify)	,	SALARY
В.	Full Name (Last, First, Middle Initial) Mikah Wilson			Transaction ID: 70411.E12494 Date of Disbursement
	Mailing Address 12700 W Arrowhead Dr.		$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ 0 & 1 & M \end{bmatrix} / \begin{bmatrix} D & D & D \\ D & 2 & 2 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{bmatrix}$	
	,	State Zip Code IN 47334-		Amount of Each Disbursement this Period
	Purpose of Disbursement salary Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		SALARY
C.	Full Name (Last, First, Middle Initial) Mikah Wilson			Transaction ID: 70411.E12495 Date of Disbursement
	Mailing Address 12700 W Arrowhead Dr.			$\begin{array}{c c} \begin{array}{c c} M & M & M \\ \hline \end{array} \begin{array}{c c} D & D & M \\ \hline \end{array} \begin{array}{c c} D & D & M \\ \hline \end{array} \begin{array}{c c} Y & Y & Y & Y \\ \hline \end{array} \begin{array}{c} Y & Y & Y \\ \end{array} \begin{array}{c} Y & Y & Y \\ \end{array} \end{array} \begin{array}{c} Y & Y & Y \\ \end{array} \begin{array}{c} Y & Y & $
		State Zip Code IN 47334-		Amount of Each Disbursement this Period
	Purpose of Disbursement salary	001	584.24 Refund or Disposal of Excess	
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		SALARY
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	NAME OF COMMITTEE (In Full)		7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
\rangle	Mike Pence Committee					
Α.	Full Name (Last, First, Middle Initial) Mikah Wilson				Transaction ID: 70 Date of Disburseme	ent
	Mailing Address 12700 W Arrowhead Dr.				02 02	Y 2007
	,		ip Code 17334-		Amount of Each Dis	sbursement this Period
	Purpose of Disbursement travel reimbursement			000	Defended Disco	24.78
	Candidate Name		C	002 Category/ Type	Refund or Dispo Contributions Re 11 C.F.R. 400.5	equired Under
	Senate President	ment For: Primary Other (specify	General		TRAVEL REIMBU	IRSEMENT
	State: District:					
В.	Full Name (Last, First, Middle Initial) Mikah Wilson				Transaction ID: 70 Date of Disburseme	ent
	Mailing Address 12700 W Arrowhead Dr.		02 02	⁷ 2007		
	,		ip Code 17334-		Amount of Each Dis	sbursement this Period
	Purpose of Disbursement office supplies			001	Refund or Dispo	48.51
	Candidate Name			Category/ Type	Contributions Re 11 C.F.R. 400.5	equired Under
	Senate President	ment For: Primary Other (specify	General v) ▼		OFFICE SUPPLIE	≣S
	State: District:					
C.	Full Name (Last, First, Middle Initial) Mikah Wilson				Transaction ID: 70 Date of Disburseme	ent
	Mailing Address 12700 W Arrowhead Dr.				02 05	Y ŽOŠT
			ip Code 17334-		Amount of Each Dis	sbursement this Period
	Purpose of Disbursement salary 001				Refund or Dispo	584.25
	Candidate Name		C	Category/ Type	Contributions Re 11 C.F.R. 400.5	equired Under
	Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (specify	General		SALARY	
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S	SCHEDULE B (FEC Form 3)		llse sen	erate schedule(s)		NUMBER: PAGE 143 / 150
IT	EMIZED DISBURSEMI	ENTS	for each	category of the Summary Page	(check onl	y one) X 17 18 19a 19b 20a 20b 20c 21
						for the purpose of solicating contributions olicit contributions from such committee
5	NAME OF COMMITTEE (In Full)	using the name	and addic	33 of arry political C		Short contributions from Such committee
$ \rangle$	Mike Pence Committee					
Α.	Full Name (Last, First, Middle Initia Mikah Wilson	1)				Transaction ID: 70411.E12497 Date of Disbursement
	Mailing Address 12700 W Ar	rowhead Dr.				$\begin{bmatrix} \begin{smallmatrix} M & M \\ D & Z \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & Z \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & D & V \end{smallmatrix} \end{bmatrix} $
	City Daleville		State IN	Zip Code 47334-		Amount of Each Disbursement this Period
	Purpose of Disbursement				004	584.24
	Salary Candidate Name				001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General ecify) ▼		SALARY
_	State: District:	1)				
В.	Full Name (Last, First, Middle Initia Mikah Wilson	1)				Transaction ID: 70411.E12498 Date of Disbursement
	Mailing Address 12700 W Ar	rowhead Dr.				$ \begin{bmatrix} M & M \\ 0 & 2 \end{bmatrix} \begin{bmatrix} M & 1 & 9 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{bmatrix} $
	City Daleville		State IN	Zip Code 47334-		Amount of Each Disbursement this Period
	Purpose of Disbursement salary 001					584.25
	Candidate Name				Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General ecify) ▼		SALARY
	State: District:		` '	3, v		
C.	Full Name (Last, First, Middle Initia Mikah Wilson	1)				Transaction ID: 70411.E12479 Date of Disbursement
	Mailing Address 12700 W Ar	rowhead Dr.				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & Z \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & T \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} Y & Y & Y & Y & Y \\ Z & O & O & T \end{smallmatrix} \end{bmatrix}$
	City Daleville		State IN	Zip Code 47334-		Amount of Each Disbursement this Period
	Purpose of Disbursement	007	23.52			
	volunteer meals Candidate Name					Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General	Туре	VOLUNTEER MEALS
_	State: District:					
s	UBTOTAL of Disbursements This F	Page (optional) .			<u></u>	1192.01

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50			perate schedule(s)	FOR LINE (check only	NUMBER: PAGE 144 / 150
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	y Information copied from such Reports an for commercial purposes, other than using				
Ν	NAME OF COMMITTEE (In Full)				
/	Mike Pence Committee				
<u></u>	Full Name (Last, First, Middle Initial)				Transaction ID: 70411 F10400
A.	Mikah Wilson				Transaction ID: 70411.E12499 Date of Disbursement
	Mailing Address 12700 W Arrowho	ead Dr.			$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 0 & 2 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & E \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
	City Daleville	State IN	Zip Code 47334-		Amount of Each Disbursement this Period
	Purpose of Disbursement salary			001	584.24
	Candidate Name		l.	001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House	Disbursement For:		.) -	SALARY
	Senate President	Primary Other (sr	General Decify) T		
	State: District:	(0)	,, \		
_	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12500
В.	Mikah Wilson				Date of Disbursement
	Mailing Address 12700 W Arrowhe		$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix} $		
	City Daleville	State IN	Zip Code 47334-		Amount of Each Disbursement this Period
	Purpose of Disbursement	IIN	47334-		584.25
	salary			001	Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate	Disbursement For: Primary	General		SALARY
	President	Other (sp			
	State: District:				
C.	Full Name (Last, First, Middle Initial) Mikah Wilson				Transaction ID: 70411.E12501 Date of Disbursement
	Mailing Address 12700 W Arrowhe		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 \end{smallmatrix} \end{bmatrix} \ \ \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & 7 \end{smallmatrix} \end{bmatrix}$		
	City Daleville	State IN	Zip Code 47334-		Amount of Each Disbursement this Period
	Purpose of Disbursement		Г		584.24
	salary Candidate Name			001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House	Disbursement For:			SALADY
	Senate	Primary	General		SALARY
	President State: District:	Other (sp	pecify)		
	State: District:				
١	IIRTOTAL of Dishursements This Page (c	intional)			1752.73

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SCHEDULE B (FEC Form 3) Use seperate schedule(s)			FOR LINE (check only	NUMBER: PAGE 145 / 150		
ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page		I `	X 17 18 19a 19b	
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	y Information copied from such Reports and State for commercial purposes, other than using the nar					
Ν	NAME OF COMMITTEE (In Full)					
17	Mike Pence Committee					
<u></u>	Full Name (Last, First, Middle Initial)					
A.	Mikah Wilson				Transaction ID: 70411.E12614 Date of Disbursement	
	Mailing Address 12700 W Arrowhead Dr				$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 1 & D \\ 1 & 4 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & 2 & 0 & 0 & 7 \\ & 2 & 0 & 0 & 7 \end{bmatrix}$	
	City Daleville	State IN	Zip Code 47334-		Amount of Each Disbursement this Period	
	Purpose of Disbursement	11 V	47334		57.00	
	travel reimbursement			002	Refund or Disposal of Excess	
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
		ement For:			TRAVEL REIMBURSEMENT	
	Senate President	Other (spec	General			
	State: District:	_ Other (spec	Siry) ₩			
	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12615	
В.	Mikah Wilson				Date of Disbursement	
	Mailing Address 12700 W Arrowhead Dr	$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$				
	City	State	Zip Code		Amount of Each Disbursement this Period	
	Daleville	IN	47334-		58.00	
	Purpose of Disbursement travel reimbursement			002	Refund or Disposal of Excess	
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Disburs Senate	ement For:	General		TRAVEL REIMBURSEMENT	
	President	Other (spec				
	State: District:		•			
_	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12613	
C.	Mikah Wilson	Date of Disbursement				
	Mailing Address 12700 W Arrowhead Dr				$\begin{bmatrix} 0 & 3 & M \\ 0 & 3 & M \end{bmatrix} / \begin{bmatrix} D & D & D \\ 1 & 4 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{bmatrix}$	
	City Daleville	State IN	Zip Code 47334-		Amount of Each Disbursement this Period	
	Purpose of Disbursement			-	39.19	
	travel reimbursement			002	Refund or Disposal of Excess Contributions Required Under	
	Candidate Name			Category/ Type	11 C.F.R. 400.53	
	Office Sought: House Disburs	ement For:			TRAVEL REIMBURSEMENT	
	Senate	Primary	General		I NAVEL NEIWIDUMSEIVIENI	
	President	Other (spec	cify) 🔻			
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s	UBTOTAL of Disbursements This Page (optional)				154.19	

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SCHEDULE B (FEC Form 3) Use seperate schedule(s)			le(s)	FOR LINE (check only	NUMBER: PAGE 146 / 150		
IT	EMIZED DISBURSEMENTS		for each category of the Detailed Summary Page		X 17		
	y Information copied from such Reports and Statem for commercial purposes, other than using the name						
\rangle	NAME OF COMMITTEE (In Full) Mike Pence Committee						
Α.	Full Name (Last, First, Middle Initial) Mikah Wilson				Transaction ID: 70411.E12502 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Mailing Address 12700 W Arrowhead Dr.						
	•	State Zip Code IN 47334-			Amount of Each Disbursement this Period		
	Purpose of Disbursement salary			001	584.25 Refund or Disposal of Excess		
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disburse Senate President	ment For: Primary Gene Other (specify)	eral		SALARY		
	State: District:						
В.	Full Name (Last, First, Middle Initial) Mikah Wilson				Transaction ID: 70411.E12616 Date of Disbursement		
	Mailing Address 12700 W Arrowhead Dr.				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y \\ D & O \end{smallmatrix} O O O O \end{smallmatrix} O$		
	,	State Zip Code IN 47334-			Amount of Each Disbursement this Period		
	Purpose of Disbursement travel reimbursement			002	39.51 Refund or Disposal of Excess		
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disburse Senate President	ment For: Primary Gene Other (specify) ▼	eral		TRAVEL REIMBURSEMENT		
	State: District:	Other (speedily)					
C.	Full Name (Last, First, Middle Initial) Mikah Wilson				Transaction ID: 70411.E12503 Date of Disbursement		
	Mailing Address 12700 W Arrowhead Dr.				$\begin{bmatrix}\begin{smallmatrix}M\\03\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\26\end{smallmatrix}\end{bmatrix}^D \begin{bmatrix}\begin{smallmatrix}D\\2\end{smallmatrix}\end{bmatrix}^D \begin{bmatrix}&Y\\2007\end{smallmatrix}$		
		State Zip Code IN 47334-			Amount of Each Disbursement this Period		
	Purpose of Disbursement	584.24					
	Salary Candidate Name			001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disburse Senate President	ment For: Primary Gene Other (specify) ▼	eral	71	SALARY		
_	State: District:						
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	r Information copied from such Reports and or commercial purposes, other than using t				
1 \	NAME OF COMMITTEE (In Full)				
/	Mike Pence Committee				
<u>/</u>	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12578
	Verizon Wireless	Date of Disbursement			
	Mailing Address P.O. Box 630024	$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ 0 & 1 & M \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$			
	City	State	Zip Code		Amount of Each Disbursement this Period
	Dallas	TX	75263-0024		
	Purpose of Disbursement				771.10
	telephone Candidate Name			001 Category/	Refund or Disposal of Excess Contributions Required Under
	Cardidate Name			Type	11 C.F.R. 400.53
	Office Sought: House	Disbursement Fo	or:		TELEPHONE
	Senate	Primar	,		TEELTHONE
	State: President State: District:	Other	(specify)		
	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12579
_	Verizon Wireless				Date of Disbursement
	Mallian Address - B.O. B 20004				$\begin{bmatrix} M & M \\ 0 & 1 \end{bmatrix}$ $\begin{bmatrix} 1 & 0 \\ 1 & 0 \end{bmatrix}$ $\begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{bmatrix}$
	Mailing Address P.O. Box 630024				01 10 2007
	City	State	Zip Code		Amount of Each Disbursement this Period
	Dallas	TX	75263-0024		250.30
	Purpose of Disbursement telephone			001	Refund or Disposal of Excess
	Candidate Name			Category/	Contributions Required Under
				Туре	11 C.F.R. 400.53
	Office Sought: House Senate	Drimo			TELEPHONE
	President	Primar Other	(specify)		
	State: District:		(-		
	Full Name (Last, First, Middle Initial)				Transaction ID: 70411.E12583
C.	Verizon Wireless				Date of Disbursement
	Mailing Address P.O. Box 630024				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 2 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 9 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
	City	State	Zip Code		Amount of Each Disbursement this Period
	Dallas	TX	75263-0024		110.00
	Purpose of Disbursement telephone			001	112.88 Refund or Disposal of Excess
	Candidate Name			Category/	Contributions Required Under
				Туре	11 C.F.R. 400.53
		Disbursement Fo			TELEPHONE
	Senate President	Primar Other	ry General (specify) ▼		
	State: District:		(- - 30) ▼		
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	y Information copied from such Reports and Staten for commercial purposes, other than using the nam						
\setminus	NAME OF COMMITTEE (In Full)						
\rangle	Mike Pence Committee						
Α.	Full Name (Last, First, Middle Initial) Verizon Wireless				Transaction Date of Disb	n ID: 70411.E125 oursement	84
	Mailing Address P.O. Box 630024				02 4	09 / 20	0 0 7
	Dallas	State TX	Zip Code 75263-0024		Amount of E	ach Disbursement	
	Purpose of Disbursement telephone			001		or Disposal of Exces	
	Candidate Name			Category/ Type		tions Required Und R. 400.53	ler
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General ecify) ▼		TELEPHON	NE	
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В.	Full Name (Last, First, Middle Initial) Verizon Wireless				Transaction Date of Disb	ID: 70411.E125 oursement	88
	Mailing Address P.O. Box 630024				03 4	1 4 Y 2 0	0 0 7 °
	City Dallas	State TX	Zip Code 75263-0024		Amount of E	ach Disbursement	this Period
	Purpose of Disbursement telephone			001		or Disposal of Exces	
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	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General cify) ▼		TELEPHON	NE	
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C.	Full Name (Last, First, Middle Initial) Verizon Wireless				Transaction Date of Disb		
	Mailing Address P.O. Box 630024					14 / 20	0 0 7
	City Dallas	State TX	Zip Code 75263-0024		Amount of E	ach Disbursement	this Period
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	District.						• • • • • • • • • • • • • • • • • • • •
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SCHEDULE B (FEC Form 3)

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FOR LINE NUMBER: PAGE 149 / 150 Use seperate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the Detailed Summary Page 18 19b 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Mike Pence Committee Full Name (Last, First, Middle Initial) Transaction ID: 70411.E12599 NRCC Date of Disbursement 16 o[™] 1 2007 Mailing Address 320 First Street, SE City State Zip Code Amount of Each Disbursement this Period Washington DC 20003-25000.00 Purpose of Disbursement transfer of surplus funds 800 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: Disbursement For: 2008 House Senate X Primary General President Other (specify)

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SCHEDULE B (FEC Form 3)

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